Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF CALIFORNIA	-	
Case number (if known)	Chapter you are filing under:	
	□Chapter 7	
	□Chapter 11	
	□Chapter 12	
	■Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself							
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
1.	Your full name						
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Eeonard First name G. Middle name Anderson Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)				
2.	All other names you have used in the last 8 years Include your married or maiden names.	Leonard Gary Anderson					
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1244					

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De	btor 1 Leonard G. Ander	son	Case number (if known)			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■I have not used any business name or EINs.	☐ have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	13646 Fairgate Dr.	If Debtor 2 lives at a different address:			
		Poway, CA 92064 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		San Diego				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		PO Box 503396 San Diego, CA 92150				
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. 			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Debtor 1 Leonard G. Ander		son				Case number (if known)			
Part	2 :	Tell the Court About	our Bankr	uptcy Ca	ase				
7.	Bank	chapter of the cruptcy Code you are		eck one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy orm 2010)). Also, go to the top of page 1 and check the appropriate box.					
	choc	sing to file under	☐ Chapter	r 7					
			☐ Chapter	r 11					
			☐ Chapter	r 12					
			■ Chapte	r 13					
8.	Ном	you will pay the fee	- Lwii	II nay the	a antiro foo when I file my	notition Diagon	abook with the old	ark'a office in your local court for more details	
о.	поw	you will pay the fee	abo	ut how yo	ou may pay. Typically, if you attorney is submitting your	are paying the fe	ee yourself, you n	erk's office in your local court for more details nay pay with cash, cashier's check, or money rney may pay with a credit card or check with	
					y the fee in installments. If ee in Installments (Official Fo		option, sign and	attach the Application for Individuals to Pay	
			□ I red	quest that is not req	at my fee be waived (You nuired to, waive your fee, and	nay request this o	if your income is	are filing for Chapter 7. By law, a judge may, less than 150% of the official poverty line nents). If you choose this option, you must fill	
								103B) and file it with your petition.	
9.	Have	you filed for ruptcy within the	for ■No. hin the						
		B years?	□Yes.						
				District		When		Case number	
				District		When		Case number	
				District		When		Case number	
10.		any bankruptcy	■No						
	filed not f you,	s pending or being by a spouse who is iling this case with or by a business her, or by an ate?	∐Yes.						
				Debtor				Relationship to you	
				District		When		Case number, if known	
				Debtor				Relationship to you	
				District		When		Case number, if known	
11.		ou rent your	■No.	Go to I	ine 12.				
	resid	lence?	□Yes.	Has yo	our landlord obtained an evid	ction judgment ac	gainst you and do	you want to stay in your residence?	
					No. Go to line 12.	. 3 0	· •		
					Yes. Fill out <i>Initial Stateme</i> bankruptcy petition.	ent About an Evic	tion Judgment Ag	gainst You (Form 101A) and file it with this	

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Deb	otor 1 Leonard G. Ander	son		Case number (if known)
	B B			
		sinesses	You Own as a Sole Proprie	tor
12.	Are you a sole proprietor of any full- or part-time business?	■No.	Go to Part 4.	
		□Yes.	Name and location of bus	siness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, Sta	
	it to this petition.			ox to describe your business:
			_ 0:	ness (as defined in 11 U.S.C. § 101(27A))
				I Estate (as defined in 11 U.S.C. § 101(51B))
				defined in 11 U.S.C. § 101(53A))
			–	er (as defined in 11 U.S.C. § 101(6))
			☐ None of the abov	е
				court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■No.	I am not filing under Cha	pter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		□Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	/ Hazardous Property or An	y Property That Needs Immediate Attention
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and	■No. □Yes.	What is the hazard?	
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
				Number, Street, City, State & Zip Code

Deb Par	Leonard G. Anders t5: Explain Your Efforts t		eceive a Briefing Abo	out Credit Counseling		Case number (if kno	own)	
	Tell the court whether	Abo	out Debtor 1: I must check one:	out Credit Counseling		out Debtor 2 (Spou	se Only in a Joint Case):	
	you have received a briefing about credit counseling.		counseling agency	g from an approved credit within the 180 days before I cy petition, and I received a letion.		counseling agend	ng from an approved credit by within the 180 days before I filed petition, and I received a certificate of	
	The law requires that you receive a briefing about credit counseling before you file for bankruptcy.		1,7	e certificate and the payment u developed with the agency.			ne certificate and the payment plan, if loped with the agency.	
	You must truthfully check one of the following choices. If you cannot do so, you are not eligible to		counseling agency	g from an approved credit within the 180 days before I cy petition, but I do not have appletion.		counseling agend	ng from an approved credit by within the 180 days before I filed betition, but I do not have a pletion.	
	file. If you file anyway, the court can dismiss your case, you			r you file this bankruptcy file a copy of the certificate and /.			er you file this bankruptcy petition, you of the certificate and payment plan, if	
	will lose whatever filing fee you paid, and your creditors can begin collection activities again.		services from an a unable to obtain the days after I made it	d for credit counseling approved agency, but was nose services during the 7 my request, and exigent rit a 30-day temporary waiver		from an approved those services du request, and exig	ed for credit counseling services d agency, but was unable to obtain uring the 7 days after I made my ent circumstances merit a 30-day of the requirement.	
			To ask for a 30-day requirement, attach what efforts you mayou were unable to	temporary waiver of the a separate sheet explaining de to obtain the briefing, why obtain it before you filed for		attach a separate s to obtain the briefin before you filed for	y temporary waiver of the requirement, sheet explaining what efforts you made ng, why you were unable to obtain it bankruptcy, and what exigent uired you to file this case.	
			bankruptcy, and what exigent circumstances required you to file this case. Your case may be dismissed if the court is				dismissed if the court is dissatisfied for not receiving a briefing before you /.	
			briefing before you If the court is satisfi still receive a briefir You must file a cert agency, along with	ed with your reasons, you must g within 30 days after you file. ificate from the approved a copy of the payment plan you		receive a briefing v file a certificate fro copy of the payme	fied with your reasons, you must still within 30 days after you file. You must m the approved agency, along with a nt plan you developed, if any. If you do se may be dismissed.	
			may be dismissed. Any extension of the	you do not do so, your case e 30-day deadline is granted			ne 30-day deadline is granted only for d to a maximum of 15 days.	
			only for cause and is limited to a maximum of 15 days.			I am not required to receive a briefing about credit counseling because of:		
			☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.		☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.	
			☐ Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.		☐ Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.	
			☐ Active duty.	I am currently on active military duty in a military combat zone.		☐ Active duty.	I am currently on active military duty in a military combat zone.	
			briefing about credit	re not required to receive a counseling, you must file a credit counseling with the			are not required to receive a briefing eling, you must file a motion for waiver g with the court.	

court.

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Deb	otor 1 Leonard G. Ande	rson		Case nu	umber (if known)				
Par	t 6: Answer These Ques	tions for Repo	orting Purposes						
16.	What kind of debts do you have?		16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."						
			□No. Go to line 16b.						
			Yes. Go to line 17.						
			Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
			No. Go to line 16c.						
			Yes. Go to line 17.						
		16c. S	tate the type of debts you owe	that are not consumer debts or bu	usiness debts				
17.	Are you filing under Chapter 7?	■No. I a	am not filing under Chapter 7. (Go to line 18.					
	Do you estimate that after any exempt property is excluded and	ex		rou estimate that after any exempt I be available to distribute to unse	t property is excluded and administrative cured creditors?				
	administrative expenses are paid that funds will		No						
	be available for distribution to unsecured creditors?		Yes						
18.	How many Creditors do	■ 1-49		□ 1,000-5,000	2 5,001-50,000				
	you estimate that you owe?	□50-99 □100-199 □200-999		□5001-10,000 □10,001-25,000	☐50,001-100,000 ☐More than100,000				
19.	How much do you estimate your assets to be worth?	■\$0 - \$50,0 □\$50,001 - □\$100,001 □\$500,001	\$100,000 - \$500,000	\$1,000,001 - \$10 million \$10,000,001 - \$50 million \$50,000,001 - \$100 million \$100,000,001 - \$500 million	□\$500,000,001 - \$1 billion □\$1,000,000,001 - \$10 billion □\$10,000,000,001 - \$50 billion □More than \$50 billion				
20.	How much do you estimate your liabilities to be?	□\$0 - \$50,0 □\$50,001 - ■\$100,001 □\$500,001	\$100,000 - \$500,000	\$1,000,001 - \$10 million \$10,000,001 - \$50 million \$50,000,001 - \$100 million \$100,000,001 - \$500 million	\$500,000,001 - \$1 billion \$1,000,000,001 - \$10 billion \$10,000,000,001 - \$50 billion More than \$50 billion				
Par	t 7: Sign Below								
For	you	I have exam	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.							
			o attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this cument, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		I request rel	ief in accordance with the chap	oter of title 11, United States Code	e, specified in this petition.				
		bankruptcy 1519, and 3	case can result in fines up to \$		oney or property by fraud in connection with a to 20 years, or both. 18 U.S.C. §§ 152, 1341,				
			6. Anderson	Signature of D	Debtor 2				
		Executed or	January 12, 2016 MM / DD / YYYY	Executed on	MM / DD / YYYY				

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Debtor 1 Leonard G. Ander	rson	Cas	se number (if known)
For your attorney, if you are represented by one		ited States Code, and have	e informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. §
If you are not represented by an attorney, you do not need to file this page.) applies, certify that I have	no knowledge after an inquiry that the information
, 0	/s/ Ahren A. Tiller	Date	January 12, 2016
	Signature of Attorney for Debtor		MM / DD / YYYY
	Ahren A. Tiller		
	Printed name		
	Bankruptcy Law Center		
	Firm name		
	1230 Columbia St., Suite 1100		
	San Diego, CA 92101		
	Number, Street, City, State & ZIP Code		
	Contact phone 619-894-8831	Email address	
	250608		
	Bar number & State		

E311 2	n this inform	antion to identify w				
		nation to identify yo				
Debt	or 1	Leonard G. An	Middle Name	Last Name		
Debt	or 2 se if, filing)	First Name	Middle Name	Last Name		
Office	eu States Dai	nkruptcy Court for th	e. SOUTHERN DISTRIC	TOF CALIFORNIA		
Case (if know	number _				□ Chec	k if this is an
						ded filing
Offi	icial Fo	rm 106Sum				
Sur	nmary o	f Your Asset	s and Liabilities a	nd Certain Statistical Informatior	<u>1 </u>	12/15
inform	mation. Fill o	out all of your sche	dules first; then complete	le are filing together, both are equally responsibl the information on this form. If you are filing amon ck the box at the top of this page.		
Part	1: Summa	arize Your Assets				
					Your a	ssets of what you own
1.	Schedule A	/B: Property (Officia	al Form 106A/B)			
	1a. Copy line	e 55, Total real estat	e, from Schedule A/B		\$	0.00
	1b. Copy line	e 62, Total personal	property, from Schedule A/B		\$	19,508.00
	1c. Copy line	e 63, Total of all prop	perty on Schedule A/B		\$	19,508.00
Part	2: Summa	arize Your Liabilitie	es			
					Your I	iabilities
						nt you owe
			e Claims Secured by Propert		o \$	19,044.00
	2a. Copy the	e total you listed in C	olumn A, <i>Amount of claim,</i> a	t the bottom of the last page of Part 1 of Schedule L)	10,044.00
3.			ave Unsecured Claims (Offici Part 1 (priority unsecured clai	al Form 106E/F) ms) from line 6e of <i>Schedule E/F</i>	\$	15,880.29
	3b. Copy th	e total claims from F	Part 2 (nonpriority unsecured	claims) from line 6j of Schedule E/F	\$	136,003.00
				Your total liabilitie	es \$	170,927.29
Part	3: Summa	arize Your Income	and Expenses			
4.		Your Income (Offician combined monthly income)		le I	\$	10,443.65
		Your Expenses (Off			\$	7,283.00
Part	4: Answe	r These Questions	for Administrative and Sta	tistical Records		
6.	-		oort on this part of the form.	Check this box and submit this form to the court with	your other s	chedules.
7.	■ Yes What kind o	of debt do you have	9?			
				debts are those "incurred by an individual primarily 9g for statistical purposes. 28 U.S.C. § 159.	for a persona	l, family, or
		ebts are not prima		ave nothing to report on this part of the form. Check	this box and	submit this form to

Debtor 1 Leonard G. Anderson Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

15,194.62

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	15,880.29
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	110,001.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	125,881.29

3/	n 106A/B	Middle Name Last Name Middle Name Last Name SOUTHERN DISTRICT OF CALIFORNIA		
Spouse, if filing) United States Banki Case number Official Forn Schedule Leach category, sepa	ruptcy Court for the: S			
United States Banki Case number Official Forn Schedule	ruptcy Court for the: S			
Official Forn Schedule	n 106A/B	OUTHERN DISTRICT OF CALIFORNIA		
Official Forn Schedule				
Schedule each category, sepa				Check if this is a amended filing
each category, sepa	A/D. Drana			
	AND: Prope	erty		12/15
No. Go to Part 2. Yes. Where is the Part 2: Describe You to you own, lease, omeone else drives	property? ur Vehicles or have legal or equit i. If you lease a vehicle,	terest in any residence, building, land, or similar property? able interest in any vehicles, whether they are regist also report it on Schedule G: Executory Contracts and ty vehicles, motorcycles		ehicles you own that
3.1 Make: Fo	rd cus	Who has an interest in the property? Check one	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
- mano	cus 14	Debtor 1 only Debtor 2 only	the amount of any secure	d claims on Schedule D: ms Secured by Property. Current value of the
Model: For Year: 20' Approximate m	cus 14 iileage: 1400	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	the amount of any secure Creditors Who Have Clair	d claims on Schedule D: ms Secured by Property.
Model: For Year: 20°	cus 14 iileage: 1400	Debtor 1 only	the amount of any secure Creditors Who Have Clair Current value of the	d claims on Schedule D: ms Secured by Property. Current value of the
Model: FOOY Year: 20' Approximate m Other informati	cus 14 iileage: 1400	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property	the amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$9,799.00 aims or exemptions. Put d claims on Schedule D:
Model: For Year: 20° Approximate m Other informations and American Make:	cus 14 iileage: 1400 on: ssan ixima	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$9,799.00 Do not deduct secured clair the amount of any secure Creditors Who Have Clair Current value of the	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$9,799.00 aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the
Model: For Year: 20' Approximate m Other informati	cus 14 illeage: 1400 on: ssan uxima 98 illeage: 14900	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$9,799.00 Do not deduct secured clair the amount of any secure Creditors Who Have Clair	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$9,799.00 aims or exemptions. Put d claims on Schedule D: ms Secured by Property.

Official Form 106A/B Schedule A/B: Property page 1

D	ebtor 1	Leonar	d G.	Anderson	Case r	number (if known)	
5					ır entries from Part 2, including any e ere		\$10,408.00
P	art 3: De	scribe Your	Perso	onal and Household Items			
				legal or equitable interest in any o	f the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Example □No	old goods es: Major a Describe	applia	furnishings nces, furniture, linens, china, kitcher	ware		
				Household Good and Furnis No single item worth over \$			\$2,500.00
7.	□No	es: Televis	ng cel	and radios; audio, video, stereo, and I phones, cameras, media players, ç	digital equipment; computers, printers, s james	scanners; music co	ollections; electronic devices
				3 desktop computers with n 47" tv: \$500	nonitor: \$1000		\$1,500.00
8.	Example ■No		es and collect	d figurines; paintings, prints, or other ions, memorabilia, collectibles	artwork; books, pictures, or other art ob	jects; stamp, coin,	or baseball card collections;
9.		es: Sports,	phot	and hobbies ographic, exercise, and other hobby ruments	equipment; bicycles, pool tables, golf clu	ubs, skis; canoes a	and kayaks; carpentry tools;
	□Yes. I	Describe					
10	■No			es, shotguns, ammunition, and relate	d equipment		
11	. Clothe Examp	s	day c	lothes, furs, leather coats, designer	wear, shoes, accessories		
				Miscellaneous clothing. No single item worth over \$	650.00		\$600.00
12	■No			ewelry, costume jewelry, engagemer	t rings, wedding rings, heirloom jewelry,	watches, gems, g	old, silver
13	. Non-fa Examp	rm anima	ls cats,	birds, horses			

De	btor 1	Leonard G. And	dersc	on	Case number (if known)	
	■No			-	t already list, including any health aids you did not list	
	□Yes.	Give specific informa	ation			
15					3, including any entries for pages you have attached	\$4,600.00
Po	rt 4: De	scribe Your Financial	Accete			
				quitable interest in ar	ny of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	□No			our wallet, in your home	e, in a safe deposit box, and on hand when you file your petiti	on
					Cash on Hand	\$50.00
17.		its of money				
	Examp				nts; certificates of deposit; shares in credit unions, brokerage ith the same institution, list each.	houses, and other similar
	□No	montanono. n y	ou na	vo manpio accounte m		
	Yes				Institution name:	
			17.1.	Checking	Wells Fargo	\$600.00
			17.2.	Checking	NGFCU Checking Account	\$500.00
		,	17.3.	Savings	NGFCU Savings Account	\$250.00
		•	17.4.	Debit card	Go with Purpose Debit Card Account	\$750.00
		,	17.5.	Debit card	Go with Purpose Debit Card Account	\$200.00
			17.6.	Checking	Chase	\$150.00
18.		, mutual funds, or p oles: Bond funds, inv			erage firms, money market accounts	
	■No □Yes			Institution or issuer nar	me:	
19.		ublicly traded stock int venture	and	interests in incorpora	ated and unincorporated businesses, including an interes	et in an LLC, partnership,
		Give specific informa		about them ne of entity:	% of ownership:	
	Negoti	<i>iable instrument</i> s inc	lude p	personal checks, cashie	able and non-negotiable instruments ers' checks, promissory notes, and money orders. fer to someone by signing or delivering them.	

Official Form 106A/B

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D	ebtor 1	Leonard G.	Anderson	Case number (if known)	
	□Yes. 0	Give specific info	ormation about them Issuer name:		
21.		ment or pensio aples: Interests in		403(b), thrift savings accounts, or other pension or profit-sharing plans	
	□Yes. L	List each accour	nt separately. Type of account:	Institution name:	
22.	Your s		ed deposits you have made s	so that you may continue service or use from a company c, public utilities (electric, gas, water), telecommunications companies, o	r others
				Institution name or individual:	
			Rental deposit	Security deposit with landlord	\$2,000.00
23.	. Annuit	ties (A contract	for a periodic payment of mor	ney to you, either for life or for a number of years)	
	■No □Yes] :	ssuer name and description.		
24.	. Interes	sts in an educat	·	qualified ABLE program, or under a qualified state tuition program.	
	■No □Yes			on. Separately file the records of any interests.11 U.S.C. § 521(c):	
25.	Trusts	s, equitable or f	uture interests in property (other than anything listed in line 1), and rights or powers exercisal	ole for your benefit
	■No	•			•
	□Yes.	Give specific inf	formation about them		
26.	Exam _l			and other intellectual property seeds from royalties and licensing agreements	
	■No □Yes.	Give specific inf	formation about them		
27.	Exam		, and other general intangib ermits, exclusive licenses, coo	oles operative association holdings, liquor licenses, professional licenses	
	■No □Yes.	Give specific inf	formation about them		
M	oney or	property owed	to you?	C	urrent value of the
	·		·	Ď	ortion you own? o not deduct secured aims or exemptions.
28.	. Tax re	funds owed to	you		
	■No	Oire annaitie inte		and the same along the same and the same and the same and	
	∐Yes. 0	Give specific into	ormation about them, including	g whether you already filed the returns and the tax years	
29.	,	y support			
	<i>Exam</i> _l ■No	ples: Past due o	r lump sum alimony, spousal	support, child support, maintenance, divorce settlement, property settle	ment
		Give specific info	ormation		
30.			-	nents, disability benefits, sick pay, vacation pay, workers' compensation neone else	n, Social Security
	■No □Yes.	Give specific inf	formation		

Debtor 1	Leonard G. Anderson	Case number (if known)	
	ests in insurance policies mples: Health, disability, or life insurance; health savings account (HS	A); credit, homeowner's, or renter's insura	nce
	. Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
If you some	interest in property that is due you from someone who has died u are the beneficiary of a living trust, expect proceeds from a life insureone has died. . Give specific information	rance policy, or are currently entitled to rec	eive property because
<i>Exai</i> ■No	ns against third parties, whether or not you have filed a lawsuit o mples: Accidents, employment disputes, insurance claims, or rights to . Describe each claim		
■No	er contingent and unliquidated claims of every nature, including continuous continuous care continuous continu	counterclaims of the debtor and rights t	o set off claims
■No	financial assets you did not already list . Give specific information		
	d the dollar value of all of your entries from Part 4, including any Part 4. Write that number here		\$4,500.00
Part 5:	Describe Any Business-Related Property You Own or Have an Interest In. Li:	st any real estate in Part 1.	
7. Do you	u own or have any legal or equitable interest in any business-related proper	ty?	
No. G	Go to Part 6.		
☐Yes.	Go to line 38.		
	Describe Any Farm- and Commercial Fishing-Related Property You Own or I fyou own or have an interest in farmland, list it in Part 1.	Have an Interest In.	
6. Do y	ou own or have any legal or equitable interest in any farm- or con	nmercial fishing-related property?	
No	o. Go to Part 7.		
□Ye	s. Go to line 47.		
Part 7:	Describe All Property You Own or Have an Interest in That You Did Not	List Above	
Exa	ou have other property of any kind you did not already list? mples: Season tickets, country club membership		
■No □Yes	. Give specific information		
54. Add	d the dollar value of all of your entries from Part 7. Write that num	nber here	\$0.00

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Debtor 1	Leonard G. Anderson		Case number (if known)	
Part 8:	List the Totals of Each Part of this Form			
55. Part	1: Total real estate, line 2			\$0.00
56. Part	2: Total vehicles, line 5	\$10,408.00		
57. Part	3: Total personal and household items, line 15	\$4,600.00		
58. Part	4: Total financial assets, line 36	\$4,500.00		
59. Part	5: Total business-related property, line 45	\$0.00		
60. Part	6: Total farm- and fishing-related property, line 52	\$0.00		
61. Part	7: Total other property not listed, line 54	\$0.00		
62. Tota	personal property. Add lines 56 through 61	\$19,508.00	Copy personal property total	\$19,508.00
63. Tota	of all property on Schedule A/B. Add line 55 + line 62			\$19,508.00

Official Form 106A/B Schedule A/B: Property page 6

Fill in this infor					
Debtor 1	Leonard G. Ander	rson			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF CALIFORNIA		
Case number					
(if known)					☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - ■You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
\$609.00		\$609.00	C.C.P. § 703.140(b)(2)
		100% of fair market value, up to any applicable statutory limit	
\$2,500.00		\$2,500.00	C.C.P. § 703.140(b)(3)
		100% of fair market value, up to any applicable statutory limit	
\$1,500.00		\$1,500.00	C.C.P. § 703.140(b)(3)
		100% of fair market value, up to any applicable statutory limit	
\$600.00		\$600.00	C.C.P. § 703.140(b)(3)
		100% of fair market value, up to any applicable statutory limit	
\$50.00		\$50.00	C.C.P. § 703.140(b)(5)
		100% of fair market value, up to any applicable statutory limit	
	\$600.00 \$600.00	\$609.00	\$609.00 \$609.00 \$609.00 \$609.00 \$100% of fair market value, up to any applicable statutory limit \$1,500.00 \$100% of fair market value, up to any applicable statutory limit \$1,500.00 \$100% of fair market value, up to any applicable statutory limit \$1,500.00 \$100% of fair market value, up to any applicable statutory limit \$600.00 \$100% of fair market value, up to any applicable statutory limit \$50.00 \$50.00 \$50.00 \$100% of fair market value, up to any applicable statutory limit

Official Form 106C

Debte	or 1 Leonard G. Anderson			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
	Checking: Wells Fargo Line from Schedule A/B: 17.1	\$600.00		\$600.00	C.C.P. § 703.140(b)(5)
L	Line from Scriedule AVB. 17.1			100% of fair market value, up to any applicable statutory limit	
	Checking: NGFCU Checking Accountine from Schedule A/B: 17.2	\$500.00	\$500.0		C.C.P. § 703.140(b)(5)
-				100% of fair market value, up to any applicable statutory limit	
	Savings: NGFCU Savings Account	\$250.00		\$250.00	C.C.P. § 703.140(b)(5)
	and nom somedile //B. Trie			100% of fair market value, up to any applicable statutory limit	
	Debit card: Go with Purpose Debit	\$750.00		\$750.00	C.C.P. § 703.140(b)(5)
	Line from Schedule A/B: 17.4			100% of fair market value, up to any applicable statutory limit	
	Debit card: Go with Purpose Debit	\$200.00		\$200.00	C.C.P. § 703.140(b)(5)
	Line from Schedule A/B: 17.5			100% of fair market value, up to any applicable statutory limit	
	Checking: Chase Line from Schedule A/B: 17.6	\$150.00		\$150.00	C.C.P. § 703.140(b)(5)
-				100% of fair market value, up to any applicable statutory limit	
	Rental deposit: Security deposit with andlord	\$2,000.00		\$2,000.00	C.C.P. § 703.140(b)(5)
L	ine from Schedule A/B: 22.1			100% of fair market value, up to any applicable statutory limit	
	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/16 and every 3			iled on or after the date of adjustme	nt.)
[Yes. Did you acquire the property coveredNo	d by the exemption w	ithin 1	,215 days before you filed this case	?
	☐ Yes				

Fill in this informa	tion to identify yo	ur case:				
Debtor 1	Leonard G. And					
Debtor 2	First Name	Middle Name	Last Name			
(Spouse if, filing)	First Name	Middle Name	Last Name		_	
United States Bank	ruptcy Court for the	SOUTHERN DISTRICT OF C	CALIFORNIA		_	
Case number						ck if this is an nded filing
Official Form	106D					
Schedule D	: Creditors	s Who Have Claims	Secure	d by Prope	rty	12/15
		If two married people are filing togeth t, number the entries, and attach it to				
1. Do any creditors ha	ve claims secured by	your property?				
□No. Check thi	s box and submit th	nis form to the court with your other	er schedules. `	ou have nothing els	e to report on this form.	
■Yes. Fill in all	of the information	below.				
Part 1: List All S	Secured Claims			0.1	0.1.	0.1.0
each claim. If more that	an one creditor has a p	nore than one secured claim, list the creaticular claim, list the other creditors in der according to the creditor's name.			that supports this	Column C Unsecured portion If any
	a Service Ctr	Describe the property that secures		\$19,044.00	\$9,799.00	\$9,245.00
Creditor's Name		2014 Ford Focus 14000 mi	les			
Po Box 542		As of the date you file, the claim is apply.	: Check all that			
Omaha, NE		Contingent				
Who owes the debt	ity, State & Zip Code	□Jnliquidated □Disputed Nature of lien. Check all that apply				
Debtor 1 only	: Check one.	An agreement you made (such as		ured		
Debtor 2 only		car loan)	origago or ooc	u. 0 u		
Debtor 1 and Debtor	r 2 only	Estatutory lien (such as tax lien, me	chanic's lien)			
At least one of the d		☐Judgment lien from a lawsuit ☐	Auto Loa	•		
Check if this claim community debt	relates to a	Other (including a right to offset)	Auto Loa	· · · · · · · · · · · · · · · · · · ·		
Date debt was incurre	ed 6/2014	Last 4 digits of account nur	nber <u>5038</u>			
Add the dollar value	e of your entries in C	olumn A on this page. Write that nun	nber here:	\$19	,044.00	
If this is the last pag		the dollar value totals from all pages	•	\$19	,044.00	
		or a Dobt That You Alroady Lists	, al			
Use this page only if to collect from you fo	you have others to be or a debt you owe to see debts that you lister	or a Debt That You Already Liste e notified about your bankruptcy for someone else, list the creditor in Part d in Part 1, list the additional creditor	a debt that you t 1, and then lis	t the collection agency	here. Similarly, if you have	e more than one
Name Addr	ess					
-NONE-	000		On which li	ne in Part 1 did ye	ou enter the credito	r?
			Last 4 digits	s of account num	ber	

Fill in this int	formation to identify your	2222								
	• • • • • • • • • • • • • • • • • • • •									
Debtor 1	Leonard G. Ander		e Name	Last Nam	e					
Debtor 2	. not raine	maa	5 Hame	<u> Laot Haiii</u>						
(Spouse if, filing)	First Name	Middl	e Name	Last Nam	е					
United States	Bankruptcy Court for the:	SOUTHE	RN DISTRICT OF (CALIFORNI	A					
Case number										
(if known)								☐ Check	if this is a	า
								amend	led filing	
Official Fo	orm 106E/F									
	E/F: Creditors W	ho Hav	a Unsacura	d Claim	e				12/1	5
	and accurate as possible. Use					creditors with NO	NPRIORITY (laime I iet		
any executory c	ontracts or unexpired leases t	hat could re	sult in a claim. Also	list executor	y contracts	on Schedule A/B:	Property (Off	icial Form	106A/B) an	d on
	ecutory Contracts and Unexpired by Pro									
	n Page to this page. If you have									
•		secured C	laims							
	ditors have priority unsecured									
□No. Go to		. c.ac aga								
Yes.										
	our priority unsecured claims	. If a creditor	has more than one price	ority unsecure	ed claim, list	the creditor separat	tely for each c	aim. For ea	ch claim list	ed,
	at type of claim it is. If a claim has at the claims in alphabetical orde									
	nan one creditor holds a particula				ore triair two	priority unscoured t	Jan 13, ini oat	aric Cortario	ation rage	or r art
(For an exp	lanation of each type of claim, se	ee the instruc	ctions for this form in th	e instruction l	oooklet.)	Total claim	Priority		Nonnriori	hr
						Total Claim	Priority amount		Nonpriori amount	Ly
	chise Tax Board		Last 4 digits of acco	unt number	-	\$0.0	00	\$0.00		\$0.00
,	Creditor's Name		When was the debt i	ncurred?						
_	amento, CA 94267		Titlon was and dost.	nouncu.						
	er Street City State Zlp Code		As of the date you fi	le, the claim	is: Check all	that apply				
_	rred the debt? Check one.		Contingent							
Debtor	•		□Jnliquidated							
☐Debtor 2	2 only		Disputed							
□Debtor :	1 and Debtor 2 only		Type of PRIORITY unsecured claim:							
At least	one of the debtors and another		Domestic support obligations							
Check	if this claim is for a communit	ty debt	Taxes and certain other debts you owe the government							
Is the clai	im subject to offset?		☐Claims for death or	personal inju	ry while you	were intoxicated				
No			□Other. Specify	latiaa Onl	<u></u>					
∐Yes				Notice On	y 					
2.2 Inter	nal Revenue Service		Last 4 digits of acco	unt number	1244	\$15,880.2	29 \$2	2,961.46	\$12.	918.83
Priority	Creditor's Name							-,001110		
	Box 7346	•	When was the debt i	ncurred?	2010, 20	014				
	idelphia, PA 19101-7346 er Street City State Zlp Code	<u> </u>	As of the date you fi	le, the claim	is: Check all	that apply				
Who incu	rred the debt? Check one.		Contingent							
Debtor	1 only		□Jnliquidated							
□Debtor 2	2 only		Disputed							
Debtor	1 and Debtor 2 only		Type of PRIORITY un	nsecured cla	im:					
At least	At least one of the debtors and another Domestic support obligations									
Chack	if this claim is for a communit	claim is for a community debt								
	in this claim is for a community	., acot	□Claims for death or	=	_					
No	,		☐Other. Specify							
□Yes				Taxes						

Debto	r 1 Leonard G. Anderson	Case number (if know)	
Part 2	List All of Your NONPRIORITY Unsecure	ed Claims	
3. Do	any creditors have nonpriority unsecured claims a	against you?	
	No. You have nothing to report in this part. Submit this	form to the court with your other schedules.	
	Yes.	·	
cla	nim, list the creditor separately for each claim. For each	phabetical order of the creditor who holds each claim. If a creditor has more than a claim listed, identify what type of claim it is. Do not list claims already included in Par Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation	t 1. If more than one
4.1	Advanced Homecare	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name 27349 Jefferson Ave., Ste. 100 Temecula, CA 92590	When was the debt incurred?	-
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	Contingent	
	Debtor 1 only	□Jnliquidated	
	Debtor 2 only	Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐At least one of the debtors and another	Student loans	
	Check if this claim is for a community debt Is the claim subject to offset?	Dbligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐Yes	Other. Specify Notice Only	_
4.2	AFSA/College Loan Corp Nonpriority Creditor's Name 501 Bleeker Street	Last 4 digits of account number 7089 When was the debt incurred? 9/2006	\$20,509.00
	Utica, NY 13501-2401		_
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Contingent	
	Debtor 2 only	□Jnliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	<u> </u>	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	Check if this claim is for a community debt is the claim subject to offset?	Dbligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■No	Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	□ Dther. Specify	
		Student Loan	
4.3	Allan Johnson	Last 4 digits of account number	\$2,500.00
4.3	Nonpriority Creditor's Name 45-180 Mahalani Pl. #10	When was the debt incurred? 2010	\$2,500.00
	Kaneohe, HI 96744 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	-
	Who incurred the debt? Check one.	Doublesont	
	Debtor 1 only	Contingent	
	Debtor 2 only	□ Jnliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: Student loans	
	Check if this claim is for a community debt		
	Is the claim subject to offset?	Dbligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	∐ Yes	■Other. Specify Lease deficiency	

Debtor 1	Leonard G. Anderson	Case number (if know)				
	AT&T Mobility Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00			
	P.O. Box 60017	When was the debt incurred?				
_	Los Angeles, CA 90060 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	Contingent				
	Debtor 1 only	□Jnliquidated				
	Debtor 2 only	Disputed				
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:				
	At least one of the debtors and another	□Student loans				
	Check if this claim is for a community debt ls the claim subject to offset?	Dbligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	Debts to pension or profit-sharing plans, and other similar debts				
	□ Yes	■Other. Specify Notice Only				
	CACH LLC	Last 4 digits of account number 0xxx	\$428.00			
	Nonpriority Creditor's Name 4340 S Monaco St, FI 2 Denver, CO 80237	When was the debt incurred? 9/2015				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	Contingent				
	Debtor 2 only	☐Jnliquidated				
	Debtor 1 and Debtor 2 only	Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	Check if this claim is for a community debt	Btudent loans				
	Is the claim subject to offset?	Dbligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■Other. Specify Collection Account - Capital One				
	Capital One	Last 4 digits of account number 3656	\$503.00			
	Nonpriority Creditor's Name PO Box 30281	When was the debt incurred? 3/2006-10/2013				
	Salt Lake City, UT 84130	As of the date was file the alabasis to Obsale all that are he				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	Contingent				
	Debtor 2 only	□Jnliquidated				
	Debtor 1 and Debtor 2 only	Disputed				
	_	Type of NONPRIORITY unsecured claim:				
	At least one of the debtors and another	☐Student loans				
	Check if this claim is for a community debt is the claim subject to offset?	Dbligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	Debts to pension or profit-sharing plans, and other similar debts				

Debtor 1 Leonard G. Anderson		Case number (if know)				
4.7	Dept of Ed / Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	0443	\$3,458.00		
	121 S 13th St. Lincoln, NE 68508	When was the debt incurred?	6/2012			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.	Contingent				
	Debter 3 only	□Jnliquidated				
	Debtor 2 only Debtor 1 and Debtor 2 only	Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	_	Student loans				
	Check if this claim is for a community debt Is the claim subject to offset?	Dbligations arising out of a separ report as priority claims	ation agreement or divorce that you did not			
	No	Debts to pension or profit-sharing	plans, and other similar debts			
	∐Yes					
		Student Lo	pan			
4.8	Dept of Ed / Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	3603	\$6,772.00		
	121 S 13th St. Lincoln, NE 68508	When was the debt incurred?	4/2011			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.	Contingent				
	Debtor 1 only	□Jnliquidated				
	Debtor 2 only	Disputed				
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:			
	At least one of the debtors and another	Student loans				
	Check if this claim is for a community debt Is the claim subject to offset?	Dbligations arising out of a separ report as priority claims	ation agreement or divorce that you did not			
	No	Debts to pension or profit-sharing				
	□ Yes	☐Other. Specify				
		Student Lo				
4.9	Dept of Ed / Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	9788	\$9,366.00		
	121 S 13th St. Lincoln, NE 68508	When was the debt incurred?	10/2003			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.	Contingent				
	Debtor 1 only	□Jnliquidated				
	Debtor 2 only	Disputed				
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:			
	At least one of the debtors and another	Student loans				
	Check if this claim is for a community debt is the claim subject to offset?	Dbligations arising out of a separ report as priority claims	ation agreement or divorce that you did not			
	• No	Debts to pension or profit-sharing	plans, and other similar debts			
	Yes	☐Dther. Specify				
	_	Student Lo	oan			

Debto	Leonard G. Anderson		Case number (if know)	
4.10	Dept of Ed / Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	0443	\$2,257.00
	121 S 13th St. Lincoln, NE 68508	When was the debt incurred?	6/2012	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	Contingent		
	Debtor 1 only	□Jnliquidated		
	Debtor 2 only Debtor 1 and Debtor 2 only	Disputed		
		Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	Student loans		
	■Check if this claim is for a community debt Is the claim subject to offset?	Dbligations arising out of a separ report as priority claims	ation agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	plans, and other similar debts	
	<u></u> res			
		Student Lo	pan	
4.11	Dept of Ed / Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	9788	\$4,764.00
	121 S 13th St. Lincoln, NE 68508	When was the debt incurred?	8/2002	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	Contingent		
	Debtor 1 only	□Jnliquidated		
	Debtor 2 only	Disputed		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	Student loans		
	■Check if this claim is for a community debt Is the claim subject to offset?	Dbligations arising out of a separ report as priority claims	ation agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	plans, and other similar debts	
	□ Yes	Dther. Specify		
		Student Lo	pan	
4.12	Dept of Ed / Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	9788	\$4,826.00
	121 S 13th St. Lincoln, NE 68508	When was the debt incurred?	10/2003	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	Contingent		
	Debtor 1 only	□Jnliquidated		
	Debtor 2 only	Disputed		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	Student loans		
	Check if this claim is for a community debt Is the claim subject to offset?	Dbligations arising out of a separ report as priority claims	ation agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	plans, and other similar debts	
	∐Yes	☐ Dther. Specify		
	_ . ~~	Student Lo	oan	

Debto	Leonard G. Anderson		Case number (if know)	
4.13	Dept of Ed / Nelnet	Last 4 digits of account number	7940	\$10,672.00
	Nonpriority Creditor's Name 121 S 13th St. Lincoln, NE 68508	When was the debt incurred?	10/2011	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one. Debtor 1 only	Contingent		
	Debtor 2 only	□Jnliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured Student loans	d claim:	
	■Check if this claim is for a community debt Is the claim subject to offset?	<u> </u>	ation agreement or divorce that you did not	
	■No	Debts to pension or profit-sharing	plans, and other similar debts	
	Yes	Other. Specify Student Lo	oan	
4.14	Dept of Ed / Nelnet	Last 4 digits of account number	9788	\$3,506.00
	Nonpriority Creditor's Name 121 S 13th St. Lincoln, NE 68508	When was the debt incurred?	8/2002	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	Contingent		
	Debtor 1 only	□Jnliquidated		
	Debtor 2 only	Disputed		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	Student loans		
	Check if this claim is for a community debt ls the claim subject to offset?	☐Obligations arising out of a separ report as priority claims	ation agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	plans, and other similar debts	
	□Yes	☐Other. Specify		
		Student Lo	pan	
4.15	Dept of Ed / Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	7624	\$7,289.00
	121 S 13th St. Lincoln, NE 68508	When was the debt incurred?	6/2010	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	Contingent		
	Debtor 1 only	□ Unliquidated		
	Debtor 2 only			
	Debtor 1 and Debtor 2 only	☐Disputed Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	Student loans		
	■Check if this claim is for a community debt Is the claim subject to offset?	<u> </u>	ation agreement or divorce that you did not	
	■No	Debts to pension or profit-sharing	plans, and other similar debts	
	∐Yes	□ Dther. Specify		
		Student Lo	oan	

4.16 Dept of Ed / Neinet Norminitry Credition's Name 121 \$ 131 \$ 131 \$ 131 \$ 131 \$ 5 \$ 1.	Debto	Leonard G. Anderson	Case number (if know)		
121 S 13th St. When was the debt incurred? 10/2011	4.16	•	Last 4 digits of account number	7940	\$6,772.00
As of the date you file, the claim is: Check all that apply Debtor 1 only		121 S 13th St.	When was the debt incurred?	10/2011	
Debtor 1 only			As of the date you file, the claim	s: Check all that apply	
Debtor 2 only Debtor 1 and Debtors and another Check if this claim is for a community debt is the claim subject to offset? No portion of the debtors and another Debtor 2 only Debtor 3 only 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 4 only Debtor 5 only Debtor 4 only Debtor 5 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 6 only Debtor 7 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 8 only Debtor 9 only D		<u></u>	Contingent		
Debtor 1 and Debtor 2 only Student loans		Debtor 2 only	_ :		
Student Loans Student Loan			<u> </u>		
Student Loans				d claim:	
Is the claim subject to offset? Poept of Ed / Nelnet Last 4 digits of account number 7624 \$4,809.00			<u> </u>		
Dept of Ed / Nelnet Student Loan		·		ation agreement or divorce that you did not	
Student Loan Student Loan For Ed / Neinet Student Loan For Ed / Neinet Student Loan For Ed / Neinet State St		No	Debts to pension or profit-sharing		
Last 4 digits of account number 7624 \$4,809.00		□ Yes	Dther. Specify		
Nonpriority Creditor's Name 121 S 13th St. Lincoln, NE 68508 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 sthe claim subject to offset? Dept of Ed / Nelnet Nonpriority Creditor's Name 121 S 13th St. Lincoln, NE 68508 Number Street City State Zip Code Who incurred the debtors and another Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 state City State Zip Code Who incurred the debtors and another Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 to 4 first State Zip Code Who incurred the debtors and another Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 onle Check if this claim is for a community debt Is the claim subject to offset? Donningent Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 community debt Is the claim subject to offset? Donningent Debtor 3 community debt Is the claim is for a community debt Is the claim subject to offset? Debtor 3 community debt Is the claim is for a community debt Is the claim subject to offset? Debtor 3 community debt Is the claim is for a community debt Is the claim subject to offset? Debtor 3 community debt Is the claim is for a community debt Is the claim subject to offset? Debtor 3 community debt Is the claim is for a community debt Is the claim subject to offset? Debtor 4 community debt Is the claim is for a community debt Is the claim is for a community debt Is the claim subject to offset? Debtor 5 community debt Is the claim is for a community debt Is the claim subject to offset? Debtor 5 community debt Is the claim is for a community debt Is the claim subject to offset? Debtor 5 community debt Is the claim is for a community debt Is the cl			Student Lo	pan	
12 i S 13 h St. Lincoln, NE 68508 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student Loan Debtor 4 by Student Cons. Debtor 5 by Student Loan Debtor 4 by Student Cons. Debtor 5 by Student Loan Debtor 6 by Student Cons. Debtor 6 by Student Co	4.17		Last 4 digits of account number	7624	\$4,809.00
Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? Dept of Ed / Nelnet Nonpriority Creditor's Name 121 S 13th St. Lincoln, NE 68508 Number Street City State Zip Code Who incurred the debtor and another Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 in debtors and another Check if this claim is for a community debt is the claim subject to offset? Debtor 3 only Debtor 4 only Disputed Type of NONPRIORITY unsecured claim: Disputed toans		121 S 13th St.	When was the debt incurred?	6/2010	
Who incurred the debt? Check one. □ chebtor 1 only □ chebtor 2 only □ chebtor 2 only □ chebtor 1 and Debtor 2 only □ check if this claim is for a community debt is the claim subject to offset? □ Dept of Ed / Nelnet Non priority Creditor's Name 121 S 13th St. □ Lincoln, NE 68508 Number Street City State Zip Code Who incurred the debtors and another □ check if this claim is for a community debt is the claim subject to offset? □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Check if this claim is for a community debt is the claim subject to offset? □ Check if this claim is for a community debt is the claim subject to offset? □ Debtor 1 only □ Check if this claim is for a community debt is the claim subject to offset? □ Debtor 1 only □ Debtor 1 only contingent □ Check if this claim is for a community debt is the claim subject to offset? □ Debtor 1 onffset? □ Debtor 1 onffset? □ Debtor 2 only contingent continue the debtors and another □ Check if this claim is for a community debt is the claim subject to offset? □ Debtor 2 only contingent continue the debtors and another community debt is the claim subject to offset? □ Debtor 2 only contingent continue the debtors and another community debt is the claim subject to offset? □ Debtor 2 only continue the debtors and another community debt is the claim subject to offset? □ Debtor 2 only continue the debtors and another community debt is the claim subject to offset? □ Debtor 2 only continue the debtors and another community debt is the claim subject to offset? □ Debtor 2 only continue the debtors and another community debt is the claim subject to offset? □ Debtor 2 only continue the debtors and another community debt is the claim subject to offset? □ Debtor 2 only continue the debtors and another community debt is the claim subject to offset? □ Debtor 2 only continue the debtors and another co			As of the date you file, the claim	s: Check all that apply	
Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 1			_		
Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Check if this claim is for a community debt Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts Type of Nonpriority Creditor's Name 121 S 13th St. Lincoln, NE 68508 Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Check if this claim is for a community debt Is the claim subject to offset? Debtor 1 only Debtor 3 and another Check if this claim is for a community debt Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts When was the debt incurred? 6/2011 As of the date you file, the claim is: Check all that apply Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Distudent Loan Debts to pension or profit-sharing plans, and other similar debts		Debtor 1 only	_ `		
Debtor 1 and Debtor 2 only ■At least one of the debtors and another ■Check if this claim is for a community debt Is the claim subject to offset? ■No Debts to pension or profit-sharing plans, and other similar debts Student Loan		Debtor 2 only			
At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts		Debtor 1 and Debtor 2 only	 ·	d claim:	
Check if this claim is for a community debt Is the claim subject to offset?		At least one of the debtors and another	<u> </u>	a ciaiii.	
□ No □ Debts to pension or profit-sharing plans, and other similar debts □ Tyes □ Dept of Ed / Nelnet □ Last 4 digits of account number □ 4797 \$770.00 4.18 □ Dept of Ed / Nelnet □ Last 4 digits of account number □ 4797 \$770.00 Nonpriority Creditor's Name 121 S 13th St. When was the debt incurred? 6/2011		•	Dbligations arising out of a separ	ation agreement or divorce that you did not	
Student Loan Student Loan			<u></u>		
A.18 Dept of Ed / Nelnet Last 4 digits of account number 4797 \$770.00			<u> </u>	plans, and other similar debts	
A.18 Dept of Ed / Nelnet Nonpriority Creditor's Name 121 S 13th St. Lincoln, NE 68508 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No Debts to pension or profit-sharing plans, and other similar debts Last 4 digits of account number 4797 \$770.00 \$770.00 \$770.00 \$770.00 \$770.00		∐Yes			
Nonpriority Creditor's Name 121 S 13th St. Lincoln, NE 68508 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No No When was the debt incurred? 6/2011 As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Dontingent Dontingent Disputed Type of NONPRIORITY unsecured claim: Student loans Disputed Type of NONPRIORITY unsecured claim: Disputed Type of NONPRIORITY unsecured claim: Debts to pension or profit-sharing plans, and other similar debts			Student Lo	oan	
Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No When was the debt incurred? 6/2011 As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Contingent Dontingent Disputed Type of NONPRIORITY unsecured claim: Student loans Debts to pension or profit-sharing plans, and other similar debts Check if the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts	4.18		Last 4 digits of account number	4797	\$770.00
Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Check all that apply As of the date you file, the claim is: Check all that apply Check all that apply As of the date you file, the claim is: Check all that apply Check all that apply As of the date you file, the claim is: Check all that apply Doblingations Type of NONPRIORITY unsecured claim: Student loans Debtingations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		121 S 13th St.	When was the debt incurred?	6/2011	
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only ■ At least one of the debtors and another ■ Check if this claim is for a community debt Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts □ Check if this claim is for a community debt Is the claim subject to offset? □ Debts to pension or profit-sharing plans, and other similar debts			As of the date you file, the claim	s: Check all that apply	
Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts		Who incurred the debt? Check one.			
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Debtigations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		Debtor 1 only	_		
Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans		Debtor 2 only			
■At least one of the debtors and another ■Check if this claim is for a community debt Is the claim subject to offset? ■No □Debts to pension or profit-sharing plans, and other similar debts		Debtor 1 and Debtor 2 only	_ ·	d claim:	
■Check if this claim is for a community debt Is the claim subject to offset? ■No Debtigations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		At least one of the debtors and another	<u></u>	. J.	
■No □Debts to pension or profit-sharing plans, and other similar debts		-	☐Dbligations arising out of a separ	ation agreement or divorce that you did not	
			<u></u>	plans, and other similar debts	
			■Other Specify Student Lo	oan	

Debtor 1 Leonard G. Anderson		Case number (if know)		
4.19	Dept of Ed / Nelnet	Last 4 digits of account number	4503	\$3,683.00
	Nonpriority Creditor's Name 121 S 13th St. Lincoln, NE 68508	When was the debt incurred?	6/2011	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one. Debtor 1 only	Contingent		
	Debtor 2 only	□Jnliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community debt	☐Student loans		
	Is the claim subject to offset?	Dbligations arising out of a separ report as priority claims	ation agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	plans, and other similar debts	
	∐Yes	Other. Specify Student Lo	pan	
4.20	Dept of Ed / Nelnet	Last 4 digits of account number	3698	\$23,045.00
	Nonpriority Creditor's Name 121 S 13th St. Lincoln, NE 68508	When was the debt incurred?	10/2012	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	Contingent		
	Debtor 1 only	□Jnliquidated		
	Debtor 2 only	Disputed		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	Student loans		
	Check if this claim is for a community debt ls the claim subject to offset?	Dbligations arising out of a separ report as priority claims	ation agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	plans, and other similar debts	
	□Yes	☐Other. Specify		
		Student Lo	pan	
4.21	Dept of Ed / Nelnet	Last 4 digits of account number	4503	\$2,257.00
	Nonpriority Creditor's Name 121 S 13th St. Lincoln, NE 68508	When was the debt incurred?	6/2011	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	Contingent		
	Debtor 1 only	□ Unliquidated		
	Debtor 2 only	Disputed		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	Student loans		
	Check if this claim is for a community debt ls the claim subject to offset?	<u> </u>	ation agreement or divorce that you did not	
	■No	Debts to pension or profit-sharing	plans, and other similar debts	
	Yes	Dther. Specify		
	_	Student Lo	oan	

Debtor 1 Leonard G. Anderson		Case number (if know)		
4.22	Dept of Ed / Nelnet Nonpriority Creditor's Name	Last 4 digits of account number 3603	\$10,371.00	
	121 S 13th St.	When was the debt incurred? 4/2011		
	Lincoln, NE 68508			
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	Contingent		
	Debtor 1 only	□Jnliquidated		
	Debtor 2 only			
	Debtor 1 and Debtor 2 only	Disputed Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another	Student loans		
	■Check if this claim is for a community debt Is the claim subject to offset?	Dbligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■No	Debts to pension or profit-sharing plans, and other similar debts		
	□ Yes	□ Dther. Specify		
		Student Loan		
4.23	Dept of Ed/Nelnet	Last 4 digits of account number	\$0.00	
	Nonpriority Creditor's Name 3015 Parker Rd. Ste. 400 Aurora, CO 80014	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	□Disputed Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another	Student loans		
	■Check if this claim is for a community debt Is the claim subject to offset?	Dbligations arising out of a separation agreement or divorce that you did not report as priority claims		
		Debts to pension or profit-sharing plans, and other similar debts		
	■No	A LPC - LNL C - A L		
	∐Yes	■Other. Specify Additional Notice Only		
4.24	ECMC	Last 4 digits of account number	\$0.00	
	Nonpriority Creditor's Name Attn: Wage Withholding Admin. 1 Imation Pl	When was the debt incurred?		
	Oakdale, MN 55128-3421 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	Contingent		
	Debtor 1 only	□ Unliquidated		
	Debtor 2 only	'		
	Debtor 1 and Debtor 2 only	Disputed Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another	Student loans		
	■Check if this claim is for a community debt Is the claim subject to offset?	Dbligations arising out of a separation agreement or divorce that you did not report as priority claims		
	No	Debts to pension or profit-sharing plans, and other similar debts		
	∐Yes	Other. Specify Notice Only		

Debto	Leonard G. Anderson	Case number (if know)	
4.25	Pomerado Hospital	Last 4 digits of account number	\$0.00
1.20	Nonpriority Creditor's Name 15615 Pomerado Road Poway, CA 92064	When was the debt incurred?	ψυ.υυ
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	Contingent	
	Debtor 1 only	□Jnliquidated	
	Debtor 2 only	Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐Student loans	
	Check if this claim is for a community debt ls the claim subject to offset?	Dbligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	∐Yes	■Other. Specify Notice Only	
4.26	Progressive Management Service Nonpriority Creditor's Name	Last 4 digits of account number 2329	\$122.00
	1521 W. Cameron Ave. FI 1 West Covina, CA 91790	When was the debt incurred? 5/2013	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	Contingent	
	Debtor 1 only	□Jnliquidated	
	Debtor 2 only	Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐Student loans	
	■Check if this claim is for a community debt Is the claim subject to offset?	Dbligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	<u></u> Yes	Other. Specify Collection Account - Scripps	
4.27	Progressive Management Service	Last 4 digits of account number 9159	\$559.00
	Nonpriority Creditor's Name 1521 W. Cameron Ave. FI 1 West Covina, CA 91790	When was the debt incurred? 2/2015	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	- Continued	
	Debtor 1 only	Contingent	
	Debtor 2 only	□ Inliquidated	
	Debtor 1 and Debtor 2 only	□Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	Check if this claim is for a community debt ls the claim subject to offset?	Dbligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■Other. Specify Collection Account - Scripps	
	— , **	euror. Opeony	

Debtor 1 Leonard G. Anderson		Case number (if know)		
4.28	Progressive Management Service Nonpriority Creditor's Name	Last 4 digits of account number	2418	\$95.00
	1521 W. Cameron Ave. FI 1 West Covina, CA 91790	When was the debt incurred?	10/2012	
	Number Street City State Zlp Code	As of the date you file, the claim is	s: Check all that apply	
	Who incurred the debt? Check one.	Contingent		
	Debtor 1 only Debtor 2 only	□Jnliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
		Type of NONPRIORITY unsecured	l claim:	
	At least one of the debtors and another	☐Student loans		
	Check if this claim is for a community debt is the claim subject to offset?	Dbligations arising out of a separa report as priority claims	ation agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	plans, and other similar debts	
	<u></u> Yes	Other. Specify Collection	Account - Scripps	
4.29	Progressive Management Service Nonpriority Creditor's Name	Last 4 digits of account number	5871	\$239.00
	1521 W. Cameron Ave. FI 1 West Covina, CA 91790	When was the debt incurred?	11/2013	
	Number Street City State Zlp Code	As of the date you file, the claim is	s: Check all that apply	
	Who incurred the debt? Check one.	Contingent		
	Debtor 1 only	□Unliquidated		
	Debtor 2 only	Disputed		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	claim:	
	At least one of the debtors and another	☐Student loans		
	■Check if this claim is for a community debt Is the claim subject to offset?	Dbligations arising out of a separa report as priority claims	ation agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	plans, and other similar debts	
	<u></u> Yes	Other. Specify Collection	Account - Scripps	
4.30	Progressive Management Service Nonpriority Creditor's Name	Last 4 digits of account number	7910	\$66.00
	1521 W. Cameron Ave. FI 1 West Covina, CA 91790	When was the debt incurred?	10/2014	
	Number Street City State Zlp Code	As of the date you file, the claim is	s: Check all that apply	
	Who incurred the debt? Check one.	Contingent		
	Debtor 1 only	□Unliquidated		
	Debtor 2 only	Disputed		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	claim:	
	At least one of the debtors and another	☐Student loans		
	■ Check if this claim is for a community debt Is the claim subject to offset?	Dbligations arising out of a separa	ation agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	plans, and other similar debts	
	∐Yes	Other. Specify Collection	Account - Scripps	

Debto	1 Leonard G. Anderson		Case number (if know)	
4.31	Progressive Management Service	Last 4 digits of account number	6537	\$514.00
	Nonpriority Creditor's Name 1521 W. Cameron Ave. FI 1 West Covina, CA 91790	When was the debt incurred?	12/2008	
	Number Street City State Zlp Code	As of the date you file, the claim is	s: Check all that apply	
	Who incurred the debt? Check one. Debtor 1 only	Contingent		
	Debtor 2 only	□Jnliquidated		
	Debtor 1 and Debtor 2 only	Disputed	Loleim	
	At least one of the debtors and another	Type of NONPRIORITY unsecured Btudent loans	i ciaim:	
	Check if this claim is for a community debt ls the claim subject to offset?	<u> </u>	ation agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	plans, and other similar debts	
	∐Yes	Other. Specify Collection	Account - Scripps	
4.32	Progressive Management Service	Last 4 digits of account number	9953	\$1,640.00
	Nonpriority Creditor's Name 1521 W. Cameron Ave. FI 1 West Covina, CA 91790	When was the debt incurred?	6/2010	
	Number Street City State Zlp Code	As of the date you file, the claim is	s: Check all that apply	
	Who incurred the debt? Check one.	Contingent		
	Debtor 1 only	 □Jnliquidated		
	Debtor 2 only Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	_	Student loans		
	■Check if this claim is for a community debt Is the claim subject to offset?	Dbligations arising out of a separa report as priority claims	ation agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	plans, and other similar debts	
	<u></u> Yes	Other. Specify Collection	Account - Scripps	
4.33	Progressive Management Service	Last 4 digits of account number	0203	\$68.00
	Nonpriority Creditor's Name 1521 W. Cameron Ave. FI 1 West Covina, CA 91790	When was the debt incurred?	8/2012	
	Number Street City State Zlp Code	As of the date you file, the claim is	s: Check all that apply	
	Who incurred the debt? Check one.	Contingent		
	Debtor 1 only	□Jnliquidated		
	Debtor 2 only	Disputed		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	claim:	
	At least one of the debtors and another	☐Student loans		
	■ Check if this claim is for a community debt Is the claim subject to offset?	☐Obligations arising out of a separa report as priority claims	ation agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	plans, and other similar debts	
	∐Yes	Other. Specify Collection	Account - Scripps	

Debto	1 Leonard G. Anderson		Case number (if know)	
4.34	Progressive Management Service	Last 4 digits of account number	5713	\$71.00
	Nonpriority Creditor's Name 1521 W. Cameron Ave. FI 1 West Covina, CA 91790	When was the debt incurred?	11/2010	-
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one. Debtor 1 only	Contingent		
	Debtor 2 only	□Jnliquidated		
	Debtor 1 and Debtor 2 only	Disputed	d ala:	
	At least one of the debtors and another	Type of NONPRIORITY unsecured Student loans	d Claim:	
	Check if this claim is for a community debt ls the claim subject to offset?	<u> </u>	ation agreement or divorce that you did not	
	■No	Debts to pension or profit-sharing	plans, and other similar debts	
	☐Yes	Other. Specify Collection	Account - Scripps	-
4.35	Progressive Management Service	Last 4 digits of account number	4988	\$129.00
	Nonpriority Creditor's Name 1521 W. Cameron Ave. FI 1 West Covina, CA 91790	When was the debt incurred?	1/2014	-
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	Contingent		
	Debtor 1 only	□Jnliquidated		
	Debtor 2 only	Disputed		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	d claim:	
	At least one of the debtors and another	☐Student loans		
	■Check if this claim is for a community debt Is the claim subject to offset?	Dbligations arising out of a separ report as priority claims	ation agreement or divorce that you did not	
	■No	Debts to pension or profit-sharing	plans, and other similar debts	
	<u></u> Yes	Other. Specify Collection	Account - Scripps	-
4.36	Progressive Management Service Nonpriority Creditor's Name	Last 4 digits of account number	8259	\$216.00
	1521 W. Cameron Ave. FI 1 West Covina, CA 91790	When was the debt incurred?	6/2012	-
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	Contingent		
	Debtor 1 only	□Unliquidated		
	Debtor 2 only	Disputed		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	d claim:	
	At least one of the debtors and another	☐Student loans		
	Check if this claim is for a community debt ls the claim subject to offset?	<u> </u>	ation agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	plans, and other similar debts	
	∐Yes	Other. Specify Collection	Account - Scripps	-

Debto	Leonard G. Anderson		Case number (if know)	
4.37	Progressive Management Service	Last 4 digits of account number	6741	\$1,038.00
	Nonpriority Creditor's Name 1521 W. Cameron Ave. FI 1 West Covina, CA 91790	When was the debt incurred?	4/2012	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	Contingent		
	Debtor 1 only	□Jnliquidated		
	Debtor 2 only	Disputed		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	l claim:	
	At least one of the debtors and another	☐Student loans		
	■Check if this claim is for a community debt Is the claim subject to offset?	Dbligations arising out of a separareport as priority claims	ation agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	plans, and other similar debts	
	∐Yes	Other. Specify Collection	Account - Pomerado	
4.38	Rash Curtis & Associates	Last 4 digits of account number	6xxx	\$1,096.00
	Nonpriority Creditor's Name 190 S. Orchard Ave., Ste. A205 Vacaville, CA 95688	When was the debt incurred?	8/2014	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	☐Contingent		
	Debtor 1 only	□ Unliquidated		
	Debtor 2 only	Disputed		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	l claim:	
	At least one of the debtors and another	☐Student loans		
	■Check if this claim is for a community debt Is the claim subject to offset?	Dbligations arising out of a separareport as priority claims	ation agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	plans, and other similar debts	
	☐Yes	Other. Specify Collection	- Advanced Home Care	
4.39	Receivables Performance	Last 4 digits of account number	4764	\$904.00
	Nonpriority Creditor's Name 20816 44th Ave. W	When was the debt incurred?	7/2015	
	Lynnwood, WA 98036 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	□Jnliquidated □		
	Debtor 1 and Debtor 2 only	Disputed Type of NONPRIORITY unsecured	l claim:	
	At least one of the debtors and another	Student loans	i ciaiii.	
	■Check if this claim is for a community debt Is the claim subject to offset?		ation agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	plans, and other similar debts	
	∐Yes	Other. Specify Collection	Account - ATT	

btor 1 Leonard G. Anderson	Case number (if know	
O Scripps Billing Correspondence Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00
10666 North Torrey Pines Rd. La Jolla, CA 92037	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	Contingent	
Debtor 1 only	□Jnliquidated	
Debtor 2 only	□Disputed	
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	☐Student loans	
Check if this claim is for a community Is the claim subject to offset?	/ debt	ce that you did not
No	Debts to pension or profit-sharing plans, and other similar	debts
□Yes	Other. Specify Notice Only	
Systematic National Collection	Last 4 digits of account number 8xxx	\$689.00
Nonpriority Creditor's Name P.O. Box 6070	When was the debt incurred? 8/2009	
Folsom, CA 95763 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	Contingent	
Debtor 1 only Debtor 2 only	□Jnliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
<u> </u>	☐Student loans	
■Check if this claim is for a community Is the claim subject to offset?	y dept	ce that you did not
No	Debts to pension or profit-sharing plans, and other similar	debts
□ Yes	■Other. Specify Collection Account - Torrey I	Pines oral
WEBBANK/DFS	Last 4 digits of account number 5463	\$0.00
Nonpriority Creditor's Name		
PO Box 81607 Austin, TX 78708-1607	When was the debt incurred? 3/2007-2/2010	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	Contingent	
Debtor 1 only	□Jnliquidated	
Debtor 2 only	Disputed	
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	☐Student loans	
Check if this claim is for a community is the claim subject to offset?	y debt Dbligations arising out of a separation agreement or divorce report as priority claims	ce that you did not
No	Debts to pension or profit-sharing plans, and other similar	debts
∐ Yes	Consumer credit Past statue of limitation to consumer credit	ollect
rt 3: List Others to Be Notified About	a Debt That You Already Listed	
List Others to be Nothieu About	a Dest mat 100 Alleady Listed	s 1 or 2. For example, if a collection agency is

Name and Address

-NONE-

On which entry in Part 1 or Part 2 did you list the original creditor?

Line of (*Check one*):

Part 1: Creditors with Priority Unsecured Claims
Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

Daluta a 4	10 4 1	Ocean report on the control of
Deptor 1	Leonard G. Anderson	Case number (if know)

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total claim	
	6a.	Domestic support obligations	6a.	\$	0.00
otal claims	CI-	Towns and costs of the debte was the management	CI-		45.000.00
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	15,880.29
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total. Add lines 6a through 6d.	6e.	\$	15,880.29
				Total Claim	
	6f.	Student loans	6f.	\$	110,001.00
otal claims					·
rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	26,002.00
	6j.	Total. Add lines 6f through 6i.	6j.	\$	136,003.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Leonard G. Ande			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF CALIFORNIA	
Case number _ (if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ■No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
2.2	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
	/				

Fill in th	is information to identify you					
Debtor 1	Leonard G. Ande					
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, f	filing) First Name	Middle Name	Name Last Name N DISTRICT OF CALIFORNIA			
United St	tates Bankruptcy Court for the:	SOUTHERN DISTRICT OF				
Coop nur	mhar					
(if known)					☐ Check if this is an amended filing	
Officia	al Form 106H					
Sche	dule H: Your Cod	lebtors			12/15	
people ar fill it out, your nam	re filing together, both are equand number the entries in the eard case number (if known	ually responsible for supplying boxes on the left. Attach the left. Attach the left. Attach the left. Answer every question.	ng correct informa le Additional Page (tion. If more space is r to this page. On the to	ate as possible. If two married needed, copy the Additional Page, p of any Additional Pages, write	
1. Do	o you have any codebtors? (If	you are filing a joint case, do r	not list either spouse	e as a codebtor.		
⊡ No ■ Ye						
Arizo	ithin the last 8 years, have yo ona, California, Idaho, Louisiana					
_	. Go to line 3.					
■Ye	s. Did your spouse, former spo	use, or legal equivalent live with	h you at the time?			
	_No ■Yes.					
	In which community sta	te or territory did you live?	-NONE-	. Fill in the name ar	nd current address of that person.	
	Name of your spouse, former sp Number, Street, City, State & Zi					
in lir Forn	olumn 1, list all of your codeb ne 2 again as a codebtor only	otors. Do not include your sp if that person is a guarantor	or cosigner. Make	sure you have listed the	g with you. List the person shown he creditor on Schedule D (Officia Schedule E/F, or Schedule G to	
	Column 1: Your codebtor Name, Number, Street, City, State and 2	ZIP Code		Column 2: The cre Check all schedule	ditor to whom you owe the debt s that apply:	
3.1	Kelley J. Sheley-Anderso 13646 Fairgate Dr. Poway, CA 92064	n		□Schedule D, lin ■Schedule E/F, □Schedule G Progressive Mai		
3.2	Kelley J. Sheley-Anderso 13646 Fairgate Dr. Poway, CA 92064	n		□Schedule D, lin ■Schedule E/F, □Schedule G Receivables Per	line <u>4.39</u>	

Fill in this information t	to identify your case:	
Debtor 1	Leonard G. Anderson	_
Debtor 2 (Spouse, if filing)		_
United States Bankrup	tcy Court for the: SOUTHERN DISTRICT OF CALIFORNIA	_
Case number (If known)		Check if this is: An amended filing A supplement showing postpetition chapte 13 income as of the following date:

Official Form 106I

Schedule I: Your Income

12/15

MM / DD/ YYYY

For Debtor 1

For Debtor 2 or

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse	
f you have more than one job,	Employment status	■ Employed	■Employed	
attach a separate page with nformation about additional	Employment status	□Not employed	□Not employed	
employers.	Occupation	Engineer	Caregiver	
nclude part-time, seasonal, or self-employed work.	Employer's name	Northrop Grumman Corp.	IHSS	
Occupation may include student or homemaker, if it applies.	Employer's address	8710 Freeport Parkway Ste. 100 Irving, TX 75063	780 Bay Boulevard, Suite 200 Chula Vista, CA 91910	
	How long employed ti	here? 10 years	since 8/2014	

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 2. 2. 12,385.83 1,759.29 deductions). If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 0.00 0.00 Calculate gross Income. Add line 2 + line 3. 12.385.83 1.759.29

Official Form 106I Schedule I: Your Income page 1

ebtor 1	Leonard G. Anderson		Case	number (<i>if known</i>)		
			For	Debtor 1		otor 2 or ng spouse
Сор	y line 4 here	4.	\$	12,385.83	\$	1,759.29
	*	-	_	,	-	<u>, </u>
List	all payroll deductions:					
5a.	Tax, Medicare, and Social Security deductions	5a.	\$	2,828.12	\$	15.27
5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00
5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00
5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00
5e.	Insurance	5e.	\$	0.00	\$	0.00
5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00
5g.	Union dues	5g.	\$	0.00	\$	40.70
5h.	Other deductions. Specify: health insurance	5h.+		260.82	+ \$	0.00
	hsa		\$	554.66	\$	0.00
	ad&d		\$	9.68	\$	0.00
	child life		\$	0.91	\$	0.00
	spouse life		\$	25.31	\$	0.00
	legal plan		\$	13.75	\$	0.00
	Itd		\$_	39.11	\$	0.00
	life		\$	133.23	\$	0.00
	Correction for underwithholding		\$	0.00	\$	240.00
Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	3,865.59	\$	295.97
Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	8,520.24	\$	1,463.32
8b. 8c. 8d. 8e. 8f.	receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependence regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistathat you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8c. 8d. 8e.	\$ \$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00
8h.	Other monthly income. Specify:	8h.+	- \$	0.00	+ \$	0.00
Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	460.09	\$	0.00
	culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	{	8,980.33 + \$_	1,463.	32 = \$ _10,443
State Inclu	e all other regular contributions to the expenses that you list in Schedude contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are reconstructions.	our deper		•	ted in <i>Sch</i> e	edule J. 1. +\$ 0
	the amount in the last column of line 10 to the amount in line 11. The e that amount on the Summary of Schedules and Statistical Summary of Ceies				a, if it	10,443
						Combined monthly incor

Official Form 106I Schedule I: Your Income page 2

Debtor 1	Leonard G. And	derson Case number (if known)		
13. Do y	ou expect an inci	rease or decrease within the year after you file this form?		
	Yes. Explain: Non-filing spouse's income going forward differs from the B22 because the state is limiting h 40 hour per week.			

Official Form 106I Schedule I: Your Income page 3

Fill	in this information to identify your case:				
Deb	otor 1 Leonard G. Anderson		Check	if this is:	
	otor 2 ouse, if filing)				ving postpetition chapter the following date:
Uni	ted States Bankruptcy Court for the: SOUTHERN DISTRICT OF CALIF	FORNIA	M	M / DD / YYYY	
	se number nown)				
0	fficial Form 106J				
S	chedule J: Your Expenses				12/15
Be inf	as complete and accurate as possible. If two married people ar ormation. If more space is needed, attach another sheet to this mber (if known). Answer every question.				
Pai	t 1: Describe Your Household Is this a joint case?				
	■No. Go to line 2. □Yes. Does Debtor 2 live in a separate household?				
	☐No☐Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i> and the control of	for Separate Househ	old of Debtor	· 2.	
2.	Do you have dependents? □No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
	Do not state the dependents names.	Daughter		12	□No ■Yes
					□No
		Son		16	■Yes □No
					□Yes
					□No
3.	Do your expenses include ■No	-			∐Yes
	expenses of people other than yourself and your dependents?				
Est	t 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless your expenses as of a date after the bankruptcy is filed. If this is a suppolicable date.				
the	lude expenses paid for with non-cash government assistance it value of such assistance and have included it on <i>Schedule I: Y</i> ficial Form 106I.)			Your expe	enses
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	4. \$		2,000.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		30.00
	Home maintenance, repair, and upkeep expenses Homeowner's association or condominium dues		4c. \$ 4d. \$		216.00 0.00
5.	Additional mortgage payments for your residence, such as hor	me equity loans	5. \$		0.00

ebtor 1 L	eonard G. Anderson	Case num	ber (if known)	
Utilities	S:			
6a. E	lectricity, heat, natural gas	6a.	\$	416.00
6b. V	Vater, sewer, garbage collection	6b.	\$	150.00
6c. T	elephone, cell phone, Internet, satellite, and cable services	6c.	\$	35.00
6d. C	Other. Specify: Cell phone	6d.	\$	220.00
	nternet		\$	112.00
	Direct TV		\$	86.00
	rash		\$	22.00
	nd housekeeping supplies		·	1,500.00
	are and children's education costs	7. 8.	\$	150.00
		9.	·	
	g, laundry, and dry cleaning		·	300.00
	al care products and services	10.		160.00
	I and dental expenses	11.	\$	300.00
	ortation. Include gas, maintenance, bus or train fare.	12.	Φ	600.00
	include car payments.		*	
	inment, clubs, recreation, newspapers, magazines, and books	13.	· -	225.00
	ble contributions and religious donations	14.	D	0.00
Insurar				
	include insurance deducted from your pay or included in lines 4 or 20.	15a.	¢	0.00
	ife insurance		·	0.00
	lealth insurance	15b.	*	0.00
	éhicle insurance	15c.	·	251.00
	Other insurance. Specify:	15d.	\$	0.00
	Do not include taxes deducted from your pay or included in lines 4 or 20.		•	
Specify		16.	\$	0.00
	nent or lease payments:		_	
	Car payments for Vehicle 1	17a.		0.00
	Car payments for Vehicle 2	17b.	\$	0.00
17c. C	Other. Specify:	17c.	\$	0.00
17d. C	Other. Specify:	17d.	\$	0.00
Your pa	ayments of alimony, maintenance, and support that you did not report as	<u> </u>		
	ed from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.		0.00
Other p	payments you make to support others who do not live with you.		\$	0.00
Specify	:	19.		
Other r	eal property expenses not included in lines 4 or 5 of this form or on Sch	edule I: Y	our Income.	
20a. N	Nortgages on other property	20a.	\$	0.00
20b. R	Real estate taxes	20b.	\$	0.00
20c. P	Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d. N	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	Iomeowner's association or condominium dues	20e.	\$	0.00
Other:	Specify: Miscellaneous	21.	+\$	300.00
	egistration upkeep and repairs		+\$	150.00
			+\$	60.00
recex	penses		ΤΨ	60.00
Calcula	ate your monthly expenses			
22a. Ad	ld lines 4 through 21.		\$	7,283.00
22b. Cc	ppy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$,
	d line 22a and 22b. The result is your monthly expenses.		\$	7,283.00
220. AU	a iiio 22a ana 22b. The result is your monthly expenses.			1,203.00
	ate your monthly net income.			
23a. C	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	10,443.65
23b. C	Copy your monthly expenses from line 22c above.	23b.	-\$	7,283.00
	Subtract your monthly expenses from your monthly income.	00	·	3,160.65
_	he result is your monthly net income.	23c.	\$	3,100.03

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

IN	0.

☐Yes. Explain here:

Fill in this inform	nation to identify your	case:			
Debtor 1	Leonard G. Ande				
Dahtano	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	SOUTHERN DISTRIC	T OF CALIFORNIA		
Case number(if known)					☐ Check if this is an amended filing
Official Form Declarati		n Individua	l Debtor's So	hedules	12/15
If two married peo	ople are filing togethe	r, both are equally resp	oonsible for supplying co	prrect information.	
obtaining money		n connection with a ba			ment, concealing property, or , or imprisonment for up to 20
Sign	Below				
Did you pay	or agree to pay some	one who is NOT an atto	orney to help you fill out	bankruptcy forms?	
■ No					
☐ Yes. N	ame of person				uptcy Petition Preparer's Notice, and Signature (Official Form 119)
	ty of perjury, I declare true and correct.	that I have read the su	mmary and schedules fil	ed with this declaration	n and
X /s/ Leor	nard G. Anderson		X		
	d G. Anderson e of Debtor 1		Signature o	f Debtor 2	

Date January 12, 2016

Fill ir	n this inform	nation to identify you	r case:			
Debto		Leonard G. Ande				
Debit	JI 1	First Name	Middle Name	Last Name		
Debto	or 2 se if, filing)	First Name	Middle Name	Last Name		
		nkruptcy Court for the:	SOUTHERN DISTRICT (
Office	d States Dai	ikrupicy Court for the.	300 TILINI DISTRICT C	JI CALII ORIVIA		
Case (if know	number					Check if this is an amended filing
Sta		of Financial		luals Filing for Barre filing together, both are	ankruptcy	12/15
		ore space is needed, n). Answer every ques		this form. On the top of an	y additional pages, write yo	our name and case
Part	1: Give D	etails About Your Ma	rital Status and Where You	ı Lived Before		
1. V	Vhat is your	current marital statu	s?			
	■ Married □ Not mar	ried				
2. C	Ouring the la	ıst 3 years, have you	lived anywhere other than	where you live now?		
ı	■ No					
L	」 Yes. Lis¹	t all of the places you l	ived in the last 3 years. Do n	ot include where you live nov	V.	
	Debtor 1 Pri	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					nity property state or territo ico, Texas, Washington and V	
	□ No					
I	Yes. Ma	ke sure you fill out Sch	nedule H: Your Codebtors (O	fficial Form 106H).		
Part	2 Explain	n the Sources of You	r Income			
F	ill in the tota	I amount of income yo	u received from all jobs and	ng a business during this yeall businesses, including parter together, list it only once u		endar years?
[☐ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■Wages, commissions, bonuses, tips	\$6,331.35	☐Wages, commissions, bonuses, tips	
			□Operating a business		☐Operating a business	

Debtor 1 Leonard G. Anderson					Case number (if known)				
				Debtor 1			Debtor 2		
				Sources of income Check all that apply.		income e deductions and ions)	Sources of inco		Gross income (before deductions and exclusions)
	r last caler nuary 1 to	idar year: December :	31, 2015)	■Wages, commissions, bonuses, tips		\$167,020.26	☐Wages, comm bonuses, tips	nissions,	
				□Operating a business			□Operating a bu	usiness	
		dar year bef December :		■Wages, commissions, bonuses, tips		\$144,772.00	□Wages, comm bonuses, tips	nissions,	
				□Operating a business			□Operating a bu	usiness	
	List each	·	he gross inco	u are filing a joint case and g		•	that you listed in lir	•	инает редіот т.
				Debtor 1 Sources of income	Gross	income	Debtor 2 Sources of inco	omo	Gross income
				Describe below		e deductions and	Describe below.	ome	(before deductions and exclusions)
		y 1 of currer filed for ban	nt year until kruptcy:	Retirement income		\$460.90			
	r last caler nuary 1 to	ndar year: December (31, 2015)	Retirement income		\$4,872.00			
		dar year bef December :		Retirement income		\$1,683.00			
Pai	rt 3: Lis	t Certain Pa	yments You	Made Before You Filed for	r Bankrup	tcv			
6.		r Debtor 1's Neither De	or Debtor 2	s debts primarily consume ebtor 2 has primarily cons personal, family, or househ	er debts? sumer dek	ots. Consumer debt	ts are defined in 11	U.S.C. § 10	1(8) as "incurred by an
		During the	90 days befo Go to line 7	re you filed for bankruptcy, o	did you pa	y any creditor a tota	al of \$6,225* or mo	re?	
		☐ Yes	paid that cre	each creditor to whom you pa editor. Do not include payme payments to an attorney for	ents for do	mestic support obliq			
		* Subject t		t on 4/01/16 and every 3 year			or after the date o	f adjustment	t.
	■ Yes.			r both have primarily cons re you filed for bankruptcy, o			al of \$600 or more?		
		□ No.	Go to line 7						
		■ Yes	List below e include pay	each creditor to whom you pa ments for domestic support for this bankruptcy case.					
	Creditor	's Name and	l Address	Dates of paym	ent	Total amount	Amount you	Was this p	payment for

Debtor 1 Leonard G. Anderson		Cas	se number (if known)			
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	nyment for
	FMC-Omaha Service Ctr Po Box 542000 Omaha, NE 68154	Payments made 90 days prior to filing.	\$1,539.00	\$19,044.00		ayment
7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general pa corporations of which you are an officer, direct including one for a business you operate as a support and alimony. No	artners; relatives of any ger tor, person in control, or ov	neral partners; partners wner of 20% or more	erships of which you of their voting sec	ou are a gener curities; and ar	al partner; ny managing agent,
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
Par 9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No	Dates of payment ns, and Foreclosures cy, were you a party in ar			Include cred	ding?
	Yes. Fill in the details. Case title	Nature of the case	Court or agency		Status of th	0.000
	Case number	Nature of the case	Court of agency		Status Of th	e case
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below No Yes. Fill in the information below.		erty repossessed, 1	foreclosed, garnis	shed, attache	d, seized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the
	Creditor Name and Address	Describe the Property Explain what happened		Date		property
	Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346	\$6750 garnished fro Property was reposses Property was foreclose Property was garnished Property was attached	rom paycheck sessed. osed. shed.		1/2015-12/201 \$ 5	

Del	btor 1 Leonard G. Anderson	Case number (if known)						
44	Within 00 days before you filed for bouley,	utan didam anditan ingludian a bank a financial in	and the state of the same					
11.		Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No						
	☐ Yes. Fill in the details.							
	Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount				
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or at No Yes	ey, was any of your property in the possession of an nother official?	assignee for the ben	efit of creditors, a				
Pai	rt 5: List Certain Gifts and Contributions							
13.	Within 2 years before you filed for bankrup	tcy, did you give any gifts with a total value of more	than \$600 per person	?				
	■ No□ Yes. Fill in the details for each gift.							
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value				
	Person to Whom You Gave the Gift and Address:							
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity No							
	Yes. Fill in the details for each gift or con		Detection	Value				
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	al Describe what you contributed	Dates you contributed	Value				
Par	rt 6: List Certain Losses							
15.	disaster, or gambling?	cy or since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other				
	■ No □ Yes. Fill in the details.							
		escribe any insurance coverage for the loss	Date of your	Value of property				
	how the loss occurred Inc	clude the amount that insurance has paid. List ending insurance claims on line 33 of Schedule A/B: operty.	loss	lost				
Pai	rt 7: List Certain Payments or Transfers							
16.	consulted about seeking bankruptcy or pre	cy, did you or anyone else acting on your behalf pay paring a bankruptcy petition? parers, or credit counseling agencies for services require		erty to anyone you				
	NoYes. Fill in the details.							
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment				
	Bankruptcy Law Center 1230 Columbia St., Suite 1100 San Diego, CA 92101 bankruptcyattorneys.org	Attorney Fees	11/17/2015	\$1,800.00				

Del	otor 1	Leonard G. Anderson				Cas	se number (ii	f known)		
17.	promi	n 1 year before you filed for bankrupto ised to help you deal with your credito t include any payment or transfer that yo	ors o	r to make payment				r transfer any prop	erty to	o anyone who
		No Yes. Fill in the details.								
	Perse Addr	on Who Was Paid ess		Description and transferred	value of any p	ropert	у	Date payment or transfer was made		Amount o paymen
18.	Includinclud	n 2 years before you filed for bankrup ferred in the ordinary course of your keel both outright transfers and transfers mee gifts and transfers that you have alreated No	ousin nade	ess or financial aff as security (such as	airs? the granting of					
	Person Who Received Transfer Address			Description and value of property transferred				ny property or received or debts hange		ite transfer was ade
	Pers	on's relationship to you								
19.	benef	n 10 years before you filed for bankru iiciary? (These are often called asset-proloo No Yes. Fill in the details.			ny property to	a self-	-settled tru	st or similar device	of w	rhich you are a
	Nam	e of trust		Description and value of the property transferred						ite Transfer was ade
Par	t 8:	List of Certain Financial Accounts, In	strui	ments, Safe Depos	it Boxes, and	Storag	je Units			
20.	sold,	n 1 year before you filed for bankrupto moved, or transferred? de checking, savings, money market,	-	•						
	house	es, pension funds, cooperatives, asso No					acposit, sir	ares in banks, cree	iii aii	ions, brokerage
	□)	es. Fill in the details.								
				st 4 digits of count number	Type of acc instrument	ount o	clos	e account was sed, sold, ved, or sferred	b	Last balance efore closing o transfe
21.	-	ou now have, or did you have within 1 or other valuables?	year	before you filed fo	r bankruptcy,	any sa	afe deposit	box or other depor	sitory	for securities,
		No Yes. Fill in the details.								
		e of Financial Institution 'ess (Number, Street, City, State and ZIP Code)		Who else had access to it? Address (Number, Street, City, State and ZIP Code)				ontents		Do you still have it?

Official Form 107

■ No

☐ Yes. Fill in the details.Name of Storage Facility

Who else has or had access

Address (Number, Street, City, State and ZIP Code)

Describe the contents

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy

to it?

Address (Number, Street, City, State and ZIP Code)

Do you still

have it?

Deb	otor 1	Leonard G. Anderson		Ca	ase number (if known)	
Par	t 9:	Identify Property You Hold or Control for	Someone Else			
23.	-	ou hold or control any property that someo omeone.	one else owns? Include any proper	ty y	you borrowed from, are storing fo	r, or hold in trust
	_	No Yes. Fill in the details.				
	-	ner's Name ress (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	escribe the property	Value
Par	t 10:	Give Details About Environmental Informa	ation			
For	the pu	urpose of Part 10, the following definitions	apply:			
	toxic	ronmental law means any federal, state, or substances, wastes, or material into the a lations controlling the cleanup of these sul	ir, land, soil, surface water, groun			
		means any location, facility, or property as vn, operate, or utilize it, including disposal	_	law	, whether you now own, operate,	or utilize it or used
		rdous material means anything an environ rdous material, pollutant, contaminant, or		s Wa	aste, hazardous substance, toxic	substance,
Rep	ort all	notices, releases, and proceedings that yo	ou know about, regardless of when	n th	ney occurred.	
24.	Has a	any governmental unit notified you that you	u may be liable or potentially liable	a un	nder or in violation of an environn	nental law?
	_	No Yes. Fill in the details.				
		ne of site ress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice
25.	Have	you notified any governmental unit of any	release of hazardous material?			
	_	No Yes. Fill in the details.				
		ne of site ress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice
26.	Have	you been a party in any judicial or adminis	strative proceeding under any env	iror	nmental law? Include settlements	and orders.
	_	No Yes. Fill in the details.				
		e Title e Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ature of the case	Status of the case
Par	t 11:	Give Details About Your Business or Con	nections to Any Business			
27.	Withi	in 4 years before you filed for bankruptcy, o	did you own a business or have ar	ıy o	of the following connections to ar	y business?
		■A sole proprietor or self-employed in a tr	•		•	
			(LLC) or limited liability partnershi	p (L	LLP)	

☐An officer, director, or managing executive of a corporation

☐An owner of at least 5% of the voting or equity securities of a corporation

Del	otor 1 _Leonard G. Anderson	Cas	se number (if known)
	■ No. None of the above applies. Go to	o Part 12.	
	☐ Yes. Check all that apply above and t	fill in the details below for each business.	
	Business Name Address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed
28.	Within 2 years before you filed for bankru institutions, creditors, or other parties.	ptcy, did you give a financial statement to a	nyone about your business? Include all financial
	■ No □ Yes. Fill in the details below.		
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Par	t 12: Sign Below		
are t	true and correct. I understand that making		declare under penalty of perjury that the answers btaining money or property by fraud in connection ars, or both.
	Leonard G. Anderson		
	onard G. Anderson nature of Debtor 1	Signature of Debtor 2	
Dat	e January 12, 2016	Date	
Did ■No □Y∈	0	ment of Financial Affairs for Individuals Filin	g for Bankruptcy (Official Form 107)?
Did ■No		ot an attorney to help you fill out bankruptc	y forms?
	-	ruptcy Petition Preparer's Notice, Declaration, a	nd Signature (Official Form 119).

Fill in this information to identify your case:								
Debtor 1	Leonard G. Anderson							
Debtor 2 (Spouse, if filing)								
United States Bankruptcy Court for the: Southern District of California								
Case number (if known)								

Check	Check as directed in lines 17 and 21:										
According to the calculations required by this Statement:											
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).										
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).										
	3. The commitment period is 3 years.										
	4. The commitment period is 5 years.										

12/15

☐Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more

space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Calculate Your Average Monthly Income

1. What is your marital and filing status? Check one only.

Not married. Fill out Column A, lines 2-11.

Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own

				Colu Deb	ımn A tor 1	Column B Debtor 2 or non-filing spouse	
2. Your gross wages, salary, tips, bonuses, overtimal payroll deductions).	e, and co	ommissi	ons (before	\$	12,385.83	\$	2,348.70
 Alimony and maintenance payments. Do not inclu- Column B is filled in. 	de payme	ents from	a spouse if	\$	0.00	\$	0.00
 All amounts from any source which are regularly of you or your dependents, including child support from an unmarried partner, members of your househ and roommates. Include regular contributions from a filled in. Do not include payments you listed on line 3 Net income from operating a business, 	ort. Included the second of th	le regula depende only if Co	r contributions ents, parents,	\$	0.00	\$	0.00
profession, or farm	Debtor						
Gross receipts (before all deductions)	\$_	0.00					
Ordinary and necessary operating expenses	- \$ _	0.00					
Net monthly income from a business, profession, or	farm \$ _	0.00	Copy here ->	\$	0.00	\$	0.00
6. Net income from rental and other real property	Debtor	1					
Gross receipts (before all deductions)	\$	0.00					
Ordinary and necessary operating expenses	-\$	0.00					

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period Official Form 122C-1

Debtor 1	Leonard G. Anderson		Case number	er (<i>if known</i>)			
			Column A Debtor 1		Column B Debtor 2	or	
7. In	terest, dividends, and royalties		\$	0.00	\$	0.00	
8. U r	nemployment compensation		\$	0.00	\$	0.00	
	o not enter the amount if you contend that the amount received was a bender the Social Security Act. Instead, list it here:	efit					
	For you\$.00					
	For your spouse \$.00					
	ension or retirement income. Do not include any amount received that we enefit under the Social Security Act.	as a	\$	460.09	\$	0.00	
Do re do	come from all other sources not listed above. Specify the source and a point include any benefits received under the Social Security Act or paymed ceived as a victim of a war crime, a crime against humanity, or internation emestic terrorism. If necessary, list other sources on a separate page and tall below.	ents al or	\$	0.00	\$	0.00	
			\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.		Φ.	0.00	\$	0.00	
			· · · · · · · · · · · · · · · · · · ·	7 -	· · · · · · · · · · · · · · · · · · ·	7 -	
	alculate your total average monthly income. Add lines 2 through 10 for sich column. Then add the total for Column A to the total for Column B.	\$	12,845.92	+ \$ _	2,348.70		15,194.62 tal average
12. Co	Determine How to Measure Your Deductions from Income opy your total average monthly income from line 11. alculate the marital adjustment. Check one:					\$	15,194.62
13. 0							
	You are married and your spouse is not filing with you.						
	Fill in the amount of the income listed in line 11, Column B, that was No dependents, such as payment of the spouse's tax liability or the spouse						
	Below, specify the basis for excluding this income and the amount of in adjustments on a separate page.	ncome c	levoted to ea	ch purpos	se. If necessa	ry, list add	ditional
	If this adjustment does not apply, enter 0 below.						
		_					
		- Ψ_ +\$					
	Total	\$_	0.0	00 c	opy here=>		0.00
14. Y	Your current monthly income. Subtract line 13 from line 12.					\$	15,194.62
15. C	Calculate your current monthly income for the year. Follow these steps	s:					
1	5a. Copy line 14 here=>					\$	15,194.62
	Multiply line 15a by 12 (the number of months in a year).					x	12
1	5b. The result is your current monthly income for the year for this part of	the for	m			\$1	82,335.44

Debtor 1

Debto	or 1	Leonard G. Anderson		Case number (if known)		
16.	Cal	culate the median family income that applies to	you. Follow these step	os:		
	16a	Fill in the state in which you live.	CA			
	16b	Fill in the number of people in your household.	4			
		Fill in the median family income for your state and	size of household.		\$	81,740.00
		To find a list of applicable median income amount instructions for this form. This list may also be available.	s, go online using the	ink specified in the separate	Ψ_	<u>·</u>
17.	Hov	do the lines compare?				
	17a	Line 15b is less than or equal to line 16c. (11 U.S.C. § 1325(b)(3). Go to Part 3. Do N				
	17b	Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calc copy your current monthly income from line	ulation of Your Dispo			
Part	3:	Calculate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)			
18.	Cop	by your total average monthly income from line 1	11.		\$	15,194.62
19.	con	fuct the marital adjustment if it applies. If you are tend that calculating the commitment period under a use's income, copy the amount from line 13.	e married, your spouse	is not filing with you, and you		
	19a	If the marital adjustment does not apply, fill in 0 or	n line 19a.		-\$	0.00
	19b	Subtract line 19a from line 18.			\$	15,194.62
20.	Cal	culate your current monthly income for the year.	Follow these steps:			4.7.4.2.2
	20a	Copy line 19b			\$_	15,194.62
		Multiply by 12 (the number of months in a year).				x 12
	20b	. The result is your current monthly income for the y	ear for this part of the	form	\$_	182,335.44
	20c	Copy the median family income for your state and	size of household from	n line 16c	\$_	81,740.00
	21.	How do the lines compare?				
		Line 20b is less than line 20c. Unless otherwiperiod is 3 years. Go to Part 4.	ise ordered by the cou	rt, on the top of page 1 of this form, o	heck box 3,	The commitment
		■ Line 20b is more than or equal to line 20c. Un commitment period is 5 years. Go to Part 4.	nless otherwise ordere	d by the court, on the top of page 1 c	of this form,	check box 4, The
Part	4:	Sign Below				
	Ву	signing here, under penalty of perjury I declare that	the information on this	statement and in any attachments is	true and co	rrect.
χ	(/s	Leonard G. Anderson				
-	Le	onard G. Anderson gnature of Debtor 1				
	Date	January 12, 2016				
	If w	MM / DD / YYYY u checked 17a, do NOT fill out or file Form 122C-2				
		ou checked 17b, fill out Form 122C-2 and file it with		f that form, copy your current monthly	v income fro	um line 14 above

Fill in this information to identify your case:	
Debtor 1 Leonard G. Anderson	
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the: Southern District of California	
Case number(if known)	□Check if this is an amended filing
Official Form 122C-2 Chapter 13 Calculation of Your Disposable II	ncome 12/1
To fill out this form, you will need your completed copy of Chapter 13 Statem Commitment Period (Official Form 122C-1).	ent of Your Current Monthly income and Calculation of
Be as complete and accurate as possible. If two married people are filing tog space is needed, attach a separate sheet to this form, Include the line numbe additional pages, write your name and case number (if known).	
Part 1: Calculate Your Deductions from Your Income	
The Internal Revenue Service (IRS) issues National and Local Standards for the questions in lines 6-15. To find the IRS standards, go online using the information may also be available at the bankruptcy clerk's office.	
Deduct the expense amounts set out in lines 6-15 regardless of your actual expexpenses if they are higher than the standards. Do not include any operating ex 122C–1, and do not deduct any amounts that you subtracted from your spouse.	penses that you subtracted from income in lines 5 and 6 of Form
If your expenses differ from month to month, enter the average expense.	
Note: Line numbers 1-4 are not used in this form. These numbers apply to infor	mation required by a similar form used in chapter 7 cases.
5. The number of people used in determining your deductions from inco	ome
Fill in the number of people who could be claimed as exemptions on your fully plus the number of any additional dependents whom you support. This number of people in your household.	
National Standards You must use the IRS National Standards to ans	wer the questions in lines 6-7.
Food, clothing, and other items: Using the number of people you entere Standards, fill in the dollar amount for food, clothing, and other items.	d in line 5 and the IRS National \$ 1,513.00

7. **Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health car costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

Debtor	1 <u>L</u>	eonard G. Anderson			(Case number (if knowr		
Pe	ople v	who are under 65 years of age							
	7a.	Out-of-pocket health care allowance per person	\$	60					
	7b.	Number of people who are under 65	Х	4					
	7c.	Subtotal. Multiply line 7a by line 7b.	\$	240.00		Copy here:	=> \$	240.00	
Po	onle v	who are 65 years of age or older							
	-		•						
		Out-of-pocket health care allowance per person	\$	144					
		Number of people who are 65 or older	X	0			Φ.	2.22	
	7f.	Subtotal. Multiply line 7d by line 7e.	\$	0.00		Copy here	=> \$	0.00	
	7g.	Total. Add line 7c and line 7f		\$	2	40.00		Copy total here=>	\$240.00_
Lo	cal St	andards You must use the IRS Local Standards to	o answ	er the questions	s in line	s 8-15.			
		n information from the IRS, the U.S. Trustee Prog etcy purposes into two parts:	gram h	as divided the	IRS Lo	cal Stand	ard fo	r housing for	
	Housi	ng and utilities - Insurance and operating expens	es						
	Housi	ng and utilities - Mortgage or rent expenses							
		rer the questions in lines 8-9, use the U.S. Truster e instructions for this form. This chart may also b						e using the link s	specified in the
8.	Ηοι	using and utilities - Insurance and operating expe	enses:	Using the numb	er of p			d in line 5,	626.00
9.		n the dollar amount listed for your county for insurand using and utilities - Mortgage or rent expenses:	ce and	operating exper	nses.			Ψ	
9.		Using the number of people you entered in line 5, fi	ill in the	e dollar amount					
		listed for your county for mortgage or rent expenses	\$ 2,533.00						
	9b.	Total average monthly payment for all mortgages a	nd othe	er debts secure	d by yo	ur home.			
		To calculate the total average monthly payment, accontractually due to each secured creditor in the 60 for bankruptcy. Next divide by 60.							
		Name of the creditor		Average monthly payment	y				
		-NONE-	9)					
						_			
		9b. Total average monthly paymen	t s	. 0	.00	Copy here=>	-\$_	0.00	Repeat this amount on line 33a.
	9c.	Net mortgage or rent expense.							
		Subtract line 9b (total average monthly payment) fror rent expense). If this number is less than \$0, ent		9a (mortgage		\$	2,5	33.00 Copy here=>	\$\$
10.		ou claim that the U.S. Trustee Program's division c calculation of your monthly expenses, fill in any addi				r housing is	s incor	rect and affects	\$ 0.00
	Ex	xplain why:		<u> </u>					

Debtor 1	Leon	ard G. Anderso	on				Case number	(if known)			
11.	Local tra	ansportation exp	enses: Check the	e number of vehic	les for whi	ch you claim	an owners	hip or ope	rating exp	ense.	
	□ 0. Go t	o line 14.									
	□ 1. Go t	o line 12.									
	■2 or m	ore. Go to line 12									
12.				S Local Standards sts that apply for						\$	602.00
13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense if more than two vehicles.											
Vel	hicle 1	Describe Vehic	le 1: 2014 For	d Focus 14000	miles						
13a.	Ownersh	nip or leasing cost	s using IRS Local	Standard			\$	517.0	00		
13b.	J	monthly payment		ured by Vehicle 1.							
	are conti		ach secured credi	here and on line 1 tor in the 60 mont			at				
	Nar	ne of each credi	tor for Vehicle 1		Average payment	-					
	FM	C-Omaha Serv	ice Ctr		\$	318.28					
		7	Total Average Mo	nthly Payment	\$	318.28	Copy here =>	-\$	318.28	Repeat this amount on line 33b.	

Name of each creditor for vehicle i	payment					
FMC-Omaha Service Ctr	\$	318.28				
Total Average Monthly Payment	\$	318.28	Copy here =>	-\$318	Repeat this amount on line 33b.	
13c. Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this number is less than \$	0, enter \$0.		\$	198.72	Copy net Vehicle 1 expense here => \$	198.72
Vehicle 2 Describe Vehicle 2:						
13d. Ownership or leasing costs using IRS Local Standard			. \$	0.00		
13e. Average monthly payment for all debts secured by Vehicle 2 leased vehicles.	2. Do not in	clude costs fo	r			
Name of each creditor for Vehicle 2	Average payment	monthly				
-NONE-	\$					
Total Average Monthly Payment	\$	0.00	Copy here => -\$	0.0	Repeat this amount on line 33c.	
13f. Net Vehicle 2 ownership or lease expense					Copy net	
Subtract line 13e from line 13d. if this number is less than \$	0, enter \$0.		\$	0.00	Vehicle 2 expense here => \$	0.00
14. Public transportation expense: If you claimed 0 vehicles Public Transportation expense allowance regardless of					in the	0.00
 Additional public transportation expense: If you claimed also deduct a public transportation expense, you may fill in not claim more than the IRS Local Standard for <i>Public Trans</i> 	what you be					0.00

Debtor 1 Leonard G. Anderson Case number (if known) Other Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories. 16. Taxes: The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. 3,083.00 Do not include real estate, sales, or use taxes. 17. Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. 40.70 Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. 18. Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form 168.22 19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. 0.00 Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. 20. Education: The total monthly amount that you pay for education that is either required: as a condition for your job, or 0.00 for your physically or mentally challenged dependent child if no public education is available for similar services. 21. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. 0.00 Do not include payments for any elementary or secondary school education. 22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. 60.00 Payments for health insurance or health savings accounts should be listed only in line 25. 23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment 60.00 expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted. \$ 9.124.64 24. Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23. **Additional Expense Deductions** These are additional deductions allowed by the Means Test. Note: Do not include any expense allowances listed in lines 6-24. 25. Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents. Health insurance 260.82 Disability insurance 39.11 Health savings account 554.66 Total 854.59 Copy total here=> \$ 854.59 Do you actually spend this total amount? No. How much do you actually spend? 26. Continued contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses 0.00 may include contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b) 27. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply. 0.00 By law, the court must keep the nature of these expenses confidential.

Debtor 1	Leonard G. Anderson	Case number (if known)							
	. Additional home energy costs. Your home energy costs are included in your non-mortgage housing and utilities allowance on line 8.								
	If you believe that you have home energy c line 8, then fill in the excess amount of hom	osts that are more than the home energy coste energy costs	sts included	l in ex	penses	on			
	You must give your case trustee documents amount claimed is reasonable and necessary	ation of your actual expenses, and you must iry.	show that t	he ac	lditiona	I	9	S	0.00
		ren who are younger than 18. The monthly pendent children who are younger than 18 younger than							
	You must give your case trustee documental claimed is reasonable and necessary and n	ation of your actual expenses, and you must oot already accounted for in lines 6-23.	explain why	y the	amount	t			
	* Subject to adjustment on 4/01/16, and ever	ery 3 years after that for cases begun on or a	after the dat	e of a	djustm	ent.	\$	S	150.00
	Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.								
		ional allowance, go online using the link sper so be available at the bankruptcy clerk's offic		sepa	rate				
	You must show that the additional amount of	claimed is reasonable and necessary.					\$	S	53.00
	Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financia instruments to a religious or charitable organization. 11 U.S.C. § 548(d)3 and (4).								
	Do not include any amount more than 15%	of your gross monthly income.					\$	S	0.00
	32. Add all of the additional expense deductions Add lines 25 through 31.							1,05	57.59
Dedu	uctions for Debt Payment								
	For debts that are secured by an interest pans, and other secured debt, fill in lines	in property that you own, including home	mortgages	s, vel	nicle				
Т	,	ent, add all amounts that are contractually d	ue to each s	secur	ed				
	Mortgages on your home	initiaples. Then divide by ee.						erage mont	hly
33a.	Copy line 9b here					=>	\$		0.00
	Loans on your first two vehicles						_		
33b.	Copy line 13b here					=>	\$	318	3.28
33c.						=>	\$	(0.00
33d.	List other secured debts:						_		
Nam	e of each creditor for other secured debt	Identify property that secures the debt		inclu	s paym ude taxe isuranc	es			
					No				
	-NONE-				Yes		\$		
				_			-		
					No				
					Yes		\$_		
					No				
					Yes	+	\$		
					-]	Ī		
33e	Total average monthly payment. Add lines	33a through 33d	\$	318	8.28	Copy total here=	:> ⁵	§ 31	8.28

Leoi	nard G. Anderson			Cas	se n	umber (<i>if known</i>)				
					e,					
No.	Go to line 35.									
Yes.	State any amount that you listed in line 33, to keep pos	ssession of your propert								
e of the	creditor	Identify property that se	cures the d	ebt	To	otal cure amount				ure
NE-				\$			÷ 60			
				Total	\$	0.00	, to	otal	. \$	0.00
								0.0		
☐ No.	Go to line 36.									
Yes.	ongoing priority claims, suc	h as those you listed in	line 19.							
	Total amount of all past-du	ue priority claims			\$	2,961.46	<u> </u>	- 60	\$	49.36
rojecte	d monthly Chapter 13 plan	payment			\$	3,160.00	<u> </u>			
Office of ne Exec o find a li	the United States Courts (for utive Office for United States st of district multipliers that include	districts in Alabama an Trustees (for all other of es your district, go online us	nd North Ca districts). sing the link	arolina) or by specified in the	X	6.10	_			
verage	monthly administrative exper	nse				\$192.76				192.76
		payment.							\$	560.40
Deduc	tions from Income									
dd all d	of the allowed deductions.									
			\$_	9,124.64	4					
Copy lir				1,057.59	9_					
Copy lir	ne 37, All of the deductions fo	or debt payment	+\$_	560.40	0					
Total de	eductions		. \$	10,742.63	3	Copy total here=	:>	:	\$	10,742.63
	we any or other No. Yes. No you chat are No. Yes. Projecte Current r Office of ind a life experies Copy lire experies Copy lire Copy lire	No. Go to line 35. Yes. State any amount that you listed in line 33, to keep pos Next, divide by 60 and fill in the of the creditor No. Go to line 36. Yes. Fill in the total amount of all ongoing priority claims, such Total amount of all past-du amount of all past-du amount of all conjunction of the United States Courts (for the Executive Office for United States of ind a list of district multipliers that include aparate instructions for this form. This list of the United States Courts (for the United States Courts (for the Executive Office for United States of ind a list of district multipliers that include aparate instructions for this form. This list of the United States (and all of the deductions for debt and all of the deductions for debt and all of the allowed deductions. Copy line 24, All of the expenses allowances Copy line 37, All of the deductions for the additional expense allowances Copy line 37, All of the deductions for the deduc	re any debts that you listed in line 33 secured by your per or other property necessary for your support or the supper or other property necessary for your support or the supper levels and a property necessary for your support or the supper levels and a property of the supper levels and a priority to a creditor, in listed in line 33, to keep possession of your property Next, divide by 60 and fill in the information below. In each of the creditor levels and fill in the information below. In each of the creditor levels and fill in the information below. In each of the creditor levels and fill in the information below. In each of the creditor levels and fill in the information below. In each of the creditor levels and fill in the information below. In each of the same of the filling date of your bankruptcy. In one of the same of the filling date of your bankruptcy. In one of the second of the second of the list is sued. In other control of the second of the list is sued. In of the states Courts (for districts in Alabama and the expectative Office for United States Trustees (for all other of the list is sued. In of the list is sued. In of the list is sued. In of the deductions for districts in Alabama and the expectation of the second of the list is sued. In of the deductions for the states and the list is sued. In of the deductions for debt payment. Add all of the deductions for debt payment. Add all of the allowed deductions. In other levels and the second of the list is sued. In other levels and the second of the list is sued. In other levels and the second of the list is sued. In other levels and the second of the list is sued. In other levels and the second of the list is sued. In other levels and the second of the list is sued. In other levels and the second of the second of the list is sued. In other levels and the second of th	re any debts that you listed in line 33 secured by your primary restricted reproperty necessary for your support or the support of your other property necessary for your support or the support of your property (called the support of your property (called the support of your property (called the Next, divide by 60 and fill in the information below. Identify property that secures the divided by 60 and fill in the information below. Identify property that secures the divided by 60 and fill in the information below. Identify property that secures the divided by 60 and fill in the information below. Identify property that secures the divided by 60 and fill in the information below. Identify property that secures the divided by 60 and fill of these priority claims. Do not in ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims. Projected monthly Chapter 13 plan payment Strice of the United States Courts (for districts in Alabama and North Cane Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link eparate instructions for this form. This list may also be available at the bankruptcy overage monthly administrative expense Add all of the deductions for debt payment. Add lines 33e through 36. I Deductions from Income add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS expense allowances Copy line 32, All of the additional expense deductions Copy line 37, All of the deductions for debt payment +\$	Total Total Total Total Total Total Total amount of all past-due priority claims. Such as those you listed in line 19. Total amount of all past-due priority claims. Such as those you listed in line 19. Total amount of all past-due priority claims. Such as those you listed in line 19. Total amount of all past-due priority claims. Such as those you listed in line 19. Total amount of all past-due priority claims. Such as those you listed in line 19. Total amount of all past-due priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims. Total amount of all past-due priority claims. Total amount of the total amount of all of these priority claims. Total amount of all past-due priority claims. Total amount of the United States Trustees (for all other districts). Total amount of the States Courts (for districts in Alabama and North Carolina) or by not executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the eparate instructions for this form. This list may also be available at the bankruptcy clerk's office. Add all of the deductions for debt payment. Add all of the deductions for debt payment. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS expense allowances S 9,124.6 Copy line 37, All of the additional expense deductions \$ 1,057.55 Copy line 37, All of the deductions for debt payment +\$ 560.40	Total No. Go to line 35. No. Go to line 35. Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the <i>cure amount</i>). Next, divide by 60 and fill in the information below. Identify property that secures the debt Total No. Go to line 36. Total No. Go to line 36. Total No. Go to line 36. Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims Strojected monthly Chapter 13 plan payment Correct monthly Chapter 13 plan payment Correct monthly Chapter 13 plan payment Correct monthly Chapter 15 plan payment Correct monthly administrative expense Add all of the deductions for debt payment. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS expense allowances Copy line 37, All of the additional expense deductions Copy line 37, All of the deductions for debt payment +\$ 560.40	are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? No. Go to line 35. Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Identify property that secures the debt Total cure amount No. Go to line 36. 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No. Go to line 35. Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the <i>cure amount</i>). Next, divide by 60 and fill in the information below. It dentify property that secures the debt Total cure amount No. Go to line 36. Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims. Total amount of all past-due priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all post-due priority claims. Total amount of all post-due priority claims. On the Administrative diffice of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts). In this list of district multipliers that includes your district, go online using the link specified in the spearate instructions for this form. This list may also be available at the bankruptcy clerk's office. Add all of the deductions for debt payment. Add lines 33e through 36. Deductions from Income and all of the additional expense allowed under IRS expense allowances Copy line 24, All of the expenses allowed under IRS expense allowances Copy line 32, All of the additional expense deductions Copy line 37, All of the deductions for debt payment * 560.40	re any debts that you listed in line 33 secured by your primary residence, a vehicle, rother property necessary for your support of the support of your dependents? No. Go to line 35. Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the <i>cure amount</i>). Next, divide by 60 and fill in the information below. Identify property that secures the debt Total cure amount Main and the cure amount of the cure amou	re any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? No. Go to line 35. Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the <i>cure amount</i>). Next, divide by 60 and fill in the information below. Net of the creditor Identify property that secures the debt Total cure amount Anothly cannount are past due as of the filling date of your bankruptcy case? 11 U.S.C. § 507. No. Go to line 36. Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims Total amount of all past-due priority claims \$ 2,961.46 ÷ 60 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$

Debtor 1	Le	eonard G.	Anderson			C	ase nur	mber (if known)		
Part 2	:	Determine `	Your Disposable Income	Under 11 U.S.C. § 13	25(b)(2)				
			current monthly income four Current Monthly Incom				d.		\$	15,194.62
	childr disabi receiv	ren. The mo lity payment red in accord	nably necessary income y nthly average of any child s is for a dependent child, re- dance with applicable nonb- expended for such child.	support payments, fos ported in Part I of For	ster car m 1220	re payments, or C-1, that you		§0	.00	
	emplo in 11 l	yer withheld J.S.C. § 541	d retirement deductions. I from wages as contribution I (b)(7) plus all required reposit. S.C. § 362(b)(19).	ns for qualified retirer	nent pl	lans, as specific	ed (. 0	.00	
42.	Total	of all deduc	ctions allowed under 11 U	J.S.C. § 707(b)(2)(A).	Сору	line 38 here:	=> {	10,742	.63	
	expen their e	ses and you expenses. Yo	necial circumstances. If sput have no reasonable alterroum must give your case trust documentation for the ex	native, describe the sp stee a detailed explan	ecial c	circumstances a	and			
Des	scribe	the special	circumstances			Amount of exp	ense	•		
					\$	-		_		
					\$			_		
					\$			_		
				Total	\$	0.00		opy ere=> \$	0.00	
44.	Total	adjustment	ts. Add lines 40 through 43	·		=>	\$	10,742.63	Copy here=> -\$	10,742.63
		-	nonthly disposable incom	e under § 1325(b)(2)	. Subtr	ract line 44 from	i line	39.	\$	4,451.99
Part 3		Change in I	ncome or Expenses							
	have of time y you fil	changed or a our case wil ed your peti	ne or expenses. If the inco are virtually certain to chan Il be open, fill in the information, check 122C-1 in the fi fill in when the increase oc	ge after the date you ation below. For exam rst column, enter line	filed yo ple, if t 2 in th	our bankruptcy the wages repo le second colum	petitic rted ii nn, ex	on and during the ncreased after		
For	m	Line	Reason for change			Date of chang	е	Increase or decrease?	Amount of	change
□12 □12 □12 □12	22C-1 22C-2 22C-1 22C-2 22C-1 22C-2							ncrease ncrease ncrease ncrease ncrease	\$ \$	
	22C-1							□ncrease □Decrease	\$	_
ے ا ل	22C-2							pedrease		

Debtor 1	Leonard G. Anderson	Case number (if known)	
Part 4:	Sign Below		
I	By signing here, under penalty of perjury you declare that the inform	nation on this statement and in any attachments is true and correct.	
Χ	/s/ Leonard G. Anderson		
	Leonard G. Anderson Signature of Debtor 1		
Date	January 12, 2016 MM / DD / YYYY		

Debtor 1 Leonard G. Anderson Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 07/01/2015 to 12/31/2015.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Northruop Grumman

Year-to-Date Income:

Starting Year-to-Date Income: \$68,352.00 from check dated 6/19/2015. Ending Year-to-Date Income: \$142,667.00 from check dated 12/31/2015.

Income for six-month period (Ending-Starting): \$74,315.00 .

Average Monthly Income: \$12,385.83.

Line 9 - Pension and retirement income

Source of Income: Boeing pension

Income by Month:

6 Months Ago:	07/2015	\$460.09
5 Months Ago:	08/2015	\$460.09
4 Months Ago:	09/2015	\$460.09
3 Months Ago:	10/2015	\$460.09
2 Months Ago:	11/2015	\$460.09
Last Month:	12/2015	\$460.09
	Average per month:	\$460.09

Debtor 1 Leonard G. Anderson Case number (if known)

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 07/01/2015 to 12/31/2015.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **IHSS**

Income by Month:

6 Months Ago:	07/2015	\$2,050.77
5 Months Ago:	08/2015	\$3,221.61
4 Months Ago:	09/2015	\$2,205.09
3 Months Ago:	10/2015	\$2,205.09
2 Months Ago:	11/2015	\$3,386.55
Last Month:	12/2015	\$1,023.09
	Average per month:	\$2,348.70

Revised 03/01/15 Name, Address, Telephone No. & I.D. No. Ahren A. Tiller 250608 1230 Columbia St., Suite 1100 San Diego, CA 92101 619-894-8831 250608

UNITED STATES BANKRUPTCY COURT

SOUTHERN DISTRICT OF CALIFORNIA 325 West "F" Street, San Diego, California 92101-6991

In Re

Leonard G. Anderson

BANKRUPTCY NO.

Last four digits of Soc. Sec. or Debtor. Individual-Taxpayer I.D. (ITIN)/Complete EIN: **xxx-xx-1244**

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF CALIFORNIA RIGHTS AND RESPONSIBILITIES OF CHAPTER 13 DEBTORS AND THEIR ATTORNEY

(Consumer Case)

It is important for debtors who file a bankruptcy case under Chapter 13 to understand their rights and responsibilities. It is also important that the debtors know what their attorney's responsibilities are, and understand the importance of communicating with their attorney to make the case successful. Debtors should also know that they may expect certain services to be performed by their attorney. It is also important for debtors to know the costs of attorneys' fees through the life of a plan. To assure that debtors and their attorney understand their rights and responsibilities in the bankruptcy process, the following rights and responsibilities provided by the United States Bankruptcy Court are hereby agreed to by the debtors and their attorney. (Nothing in this agreement should be construed to excuse an attorney from any ethical duties or responsibilities under Federal Rule of Bankruptcy Procedure 9011.)

UNLESS THE COURT ORDERS OTHERWISE,

The debtor must:

- 1. Provide accurate financial information.
- 2. Provide information in a timely manner.
- 3. Cooperate and communicate with the attorney.
- 4. Discuss with the attorney the debtor's objectives in filing the case.
- 5. Keep the trustee and attorney informed of the debtor's address and telephone number.
- 6. Inform the attorney of any wage garnishments or attachments of assets which occur or continue after the filing of the case.
- 7. Contact the attorney promptly if the debtor loses his/her job or has other financial problems.
- 8. Let the attorney know immediately if the debtor is sued before or during the case.
- 9. Inform the attorney if any tax refunds the debtor is entitled to are seized or not returned to the debtor by the IRS or Franchise Tax Board.
- 10. Contact the attorney before buying, refinancing, or selling real property or before entering into any long-term loan agreements to find out what approvals are required.

- 11. Pay any filing fees and filing expenses that may be incurred directly to the attorney.
- 12. Pay appropriate attorney's fees commensurate with this agreement and the United States Bankruptcy Court Guidelines regarding Chapter 13 Attorney Fees. If a court order is entered regarding attorney's fees, fees should be paid in accordance with the court's order.

To receive \$3,600, which is within the United States Bankruptcy Court's parameters for "initial fees," the attorney must:

- 1. Meet with the debtor to review the debtor's assets, liabilities, income and expenses.
- 2. Analyze the debtor's financial situation, and render advice to the debtor in determining whether to file a petition in bankruptcy.
- 3. Counsel the debtor regarding the advisability of filing either a Chapter 7 or Chapter 13 case, discuss both procedures with the debtor, and answer the debtor's questions.
- 4. Explain to the debtor how the attorney's fees and trustee's fees are paid.
- 5. Explain what payments will be made directly by the debtor and what payments will be made through the debtor's chapter 13 plan, with particular attention to mortgage and vehicle loan payments, as well as any other claims with accrued interest.
- 6. Explain to the debtor how, when, and where to make the chapter 13 plan payments.
- 7. Explain to the debtor that the first plan payment must be made to the Trustee within 30 days of the date the plan is filed.
- 8. Advise the debtor of the requirement to attend the § 341(a) Meeting of Creditors, and instruct the debtor as to the date, time and place of the meeting.
- 9. Advise the debtor of the necessity of maintaining liability, collision and comprehensive insurance on vehicles securing loans or leases.
- 10. Timely prepare, file and serve the debtor's petition, plan, schedules, statement of financial affairs, and any necessary amendments thereto, which may be required.
- 11. Provide an executed copy of the Rights and Responsibilities of Chapter 13 Debtors and their Attorneys and a copy of the Court's Guidelines regarding Chapter 13 Attorney Fees to the debtor.
- 12. Appear and represent the debtor at the § 341(a) Meeting of Creditors and any confirmation hearings.
- 13. Respond to the objections to plan confirmation, and where necessary, prepare, file and serve an amended plan.
- 14. Provide Certification of Eligibility for Discharge pursuant to Local Bankruptcy Rule 4004-1.
- 15. Provide such other legal services as are necessary for the administration of the case before the Bankruptcy Court, which include, but are not limited to, a continuing obligation to assist the debtor by returning telephone calls, answering questions and reviewing and sending correspondence.

Additional services may be required, but are not included in the "initial fees" of \$3,600. If necessary and when appropriate, the attorney, at the debtor's request and only with the debtor's cooperation, must provide the following services for "additional fees" described below:

- 1. Prepare, file and serve necessary modifications to the plan post-confirmation, which may include suspending, lowering or increasing plan payments.
- 2. Prepare, file and serve necessary motions to buy, sell or refinance real property and authorize use of cash collateral or assume executory contracts or unexpired leases.
- 3. Object to improper or invalid claims.
- 4. Represent the debtor in motions for relief from stay.
- 5. Prepare, file and serve necessary motions to avoid liens on real or personal property.
- 6. Prepare, file and serve necessary oppositions to motions for dismissal of case.
- 7. Provide such other legal services as are necessary for the administration of the case before the Bankruptcy Court, which include but are not limited to, presenting appropriate legal pleadings and making appropriate court appearances.

Should additional services be provided and "additional fees" requested, the attorney must:

- 1. Provide proper notice in accordance with Federal Rule of Bankruptcy Procedure 2002.
- Advise the debtor of all "additional fees" requested and file a declaration with the court stating that counsel has 2. so advised the debtor of the fees requested and the debtor has no objection to the requested fees.

The "Guidelines Regarding Chapter 13 Attorney Fees" provide for "additional fees" within the United States Bankruptcy Court's parameters for "additional fees" in the following amounts and include all court appearances required to pursue described actions:

Modified Plan (Post-Confirmation)

\$650

for fees and expenses for services rendered post-confirmation for preparing, filing, noticing, and attending hearings in regard to a debtor's modified plan under section 1329 of the Bankruptcy Code (including the preparation of amended income and expenses statements and providing proof of income). (These fees should be less for modification due to clerical error or other administrative issues.)

Opposition to Motions for Relief from Stay

\$490 (Personal property) for fees and expenses of all services rendered \$625 (Real property) in opposition to motions to modify or vacate

automatic stay.

Obtaining Orders re: Sale or Refinance of Real Property

\$545 (By stipulation for fees and expenses of all services rendered or noticed hearing) for order authorizing the sale or refinancing of real estate.

Objections to Claim

\$270 (Uncontested objections for fees and expenses of all services rendered without hearing) for preparing, filing, and noticing objections to \$380 (Contested objections a claim. (Fees must not exceed 50% of the amount with a hearing)

the trustee would have otherwise paid.)

Oppositions to Dismissal/Motions to Avoid Lien/Other

Routine Pleadings \$490

for fees and expenses of all services rendered for preparing, filing, noticing, and attending hearings in opposition to a motion to dismiss the case, for motions to avoid lien and other routine pleadings.

Motions to Value Real Property, Treat Claim as **Unsecured and Avoid Junior Lien (Lien Strips)** \$625

for fees and expenses of all services rendered for preparing, filing, noticing, and attending hearings when there is opposition to a motion to value real property, treat claim as unsecured and avoid junior lien.

Motions to Impose/Extend Automatic Stay

\$380 (Unopposed) for fees and expenses of all services rendered for preparing, filing, noticing and attending hearings in regard to a motion to impose/extend **\$545 (Opposed)**

automatic stay.

Novel and Complex Motions and Oppositions to Motions

These types of motions and oppositions may be billed at hourly rates and counsel must file a fee application in compliance with Federal Rules of Bankruptcy Procedure and Local Bankruptcy Rules 2002 and 2016.

Initial fee charged in this case is \$ 3,600.00

All post-filing fees will be paid through the plan, unless the court orders otherwise. The attorney may not receive fees directly from the debtor other than the initial retainer, unless the court orders otherwise. All "additional fees," as described above, may only be paid upon court authorization after compliance with the "Guidelines Regarding Chapter 13 Attorney Fees." The attorney may seek fees above the additional fees provided a fee application is noticed, filed and approved by the court.

If the debtor disputes the legal services provided or the fees charged by the attorney, the debtor may file an objection with the court and set the matter for hearing. The attorney may move to withdraw or the debtor may discharge the attorney at any time.

Dated: January 12, 2016 /s/ Leonard G. Anderson

Leonard G. Anderson

Debtor

Dated: January 12, 2016 /s/ Ahren A. Tiller

Ahren A. Tiller 250608
Attorney for Debtor(s)

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of California

				ithern District of Camori	ii.			
In re	Leonard G. A	nders	son	Debtor(s)	Case N		12	
				Debtor(s)	Chapte	er	_13	
	DIS	CLO	OSURE OF COMP	ENSATION OF ATTO	RNEY FOR	DE	BTOR(S)	
	compensation paid to	me v	within one year before the f	016(b), I certify that I am the attorilling of the petition in bankruptcy on of or in connection with the ba	, or agreed to be p	oaid	to me, for services rendered of	or to
	For legal servic	es, I h	ave agreed to accept		\$		3,600.00	
	Prior to the filir	g of t	his statement I have receive	ed	\$		1,800.00	
	Balance Due				\$		1,800.00	
2.	\$ 310.00 of the	filing	g fee has been paid.					
3.	The source of the cor	mpens	sation paid to me was:					
	Debtor		Other (specify):					
4.	The source of compe	nsatio	on to be paid to me is:					
	Debtor		Other (specify):					
5.	■ I have not agreed	d to sh	nare the above-disclosed co	mpensation with any other persor	unless they are m	nemb	pers and associates of my law	firm
				ensation with a person or persons names of the people sharing in th				Α
6.	In return for the abo	ve-dis	sclosed fee, I have agreed to	render legal service for all aspec	ts of the bankrupt	су са	ase, including:	
	b. Preparation and f	iling of the d	of any petition, schedules, s lebtor at the meeting of cred	ndering advice to the debtor in de statement of affairs and plan whic ditors and confirmation hearing, a	h may be required	;		
			Trustee Southern Distri porated herein by refer	ct of California Rights and F ence.	esponsibilities	of (Chapter 13 Debtors and ⁻	Thei
7.	By agreement with the	ne deb	otor(s), the above-disclosed	fee does not include the following	g service:			
				CERTIFICATION				
	I certify that the fore ankruptcy proceeding		is a complete statement of	any agreement or arrangement fo	payment to me for	or re	presentation of the debtor(s)	in
J	anuary 12, 2016			/s/ Ahren A. Tille				
	Pate			Ahren A. Tiller 2 Signature of Attorn				
				Bankruptcy Law	Center			
				1230 Columbia S San Diego, CA 9				
				619-894-8831 F		26		
				Name of law firm				

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF CALIFORNIA

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

B 201A Page 2

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Name, Address, Telephone No. & I.D. No. Ahren A. Tiller 250608
1230 Columbia St., Suite 1100
San Diego, CA 92101
619-894-8831
250608

UNITED STATES BANKRUPTCY COURT

SOUTHERN DISTRICT OF CALIFORNIA 325 West "F" Street, San Diego, California 92101-6991

In Re

Leonard G. Anderson

BANKRUPTCY NO.

Debtor.

CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

Certification of Debtor

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

Leonard G. Anderson	X /s/ Leonard G. Anderson	January 12, 2016
Printed Name(s) of Debtor(s)	Signature of Debtor	Date
Case No. (if known)	X	
	Signature of Joint Debtor (if any)	Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification. B 201B

CSD 1008 [08/21/00] Name, Address, Telephone No. & I.D. No. Ahren A. Tiller 250608 1230 Columbia St., Suite 1100 San Diego, CA 92101 619-894-8831 250608	
UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF CALIFORNIA 325 West "F" Street, San Diego, California 92101-6991	
In Re Leonard G. Anderson	BANKRUPTCY NO.
Debtor.	
VERIFICATION OF CREDIT	OR MATRIX
PART I (check and complete one):	
■ New petition filed. Creditor <u>diskette</u> required.	TOTAL NO. OF CREDITORS: 20
□ Conversion filed on See instructions on reverse side. □ Former Chapter 13 converting. Creditor diskette required. □ Post-petition creditors added. Scannable matrix required. □ There are no post-petition creditors. No matrix required.	TOTAL NO. OF CREDITORS:
 □ Amendment or Balance of Schedules filed concurrently with this original scannal Equity Security Holders. See instructions on reverse side. □ Names and addresses are being ADDED. □ Names and addresses are being DELETED. □ Names and addresses are being CORRECTED. 	ble matrix affecting Schedule of Debts and/or Schedule of
PART II (check one):	
■ The above-named Debtor(s) hereby verifies that the list of creditors is true and c	orrect to the best of my (our) knowledge.
☐ The above-named Debtor(s) hereby verifies that there are no post-petition credit the filing of a matrix is not required.	ors affected by the filing of the conversion of this case and that
Date: January 12, 2016 /s/ Leonard G. Ander	
Leonard G. Anderson	1
Signature of Debtor	

CSD 1008 (Page 2) [08/21/00]

INSTRUCTIONS

- 1) Full compliance with Special Requirements for Mailing Addresses (CSD 1007) is required.
- 2) A creditors matrix with Verification is required whenever the following occurs:
 - a) A new petition is filed. Diskette required.
 - b) A case is converted on or after SEPTEMBER 1, 2000. (See paragraph 4b concerning post-petition creditors.)
 - c) An amendment to a case on or after SEPTEMBER 1, 2000, which adds, deletes or changes creditor address information on the debtor's Schedule of Debts and/or Schedule of Equity Security Holders. Scannable matrix format required.
- 3) The scannable matrix must be originally typed or printed. It may not be a copy.
- 4) CONVERSIONS:
 - a) When converting a Chapter 13 case filed before SEPTEMBER 1, 2000, to another chapter, <u>ALL</u> creditors must be listed on the mailing matrix at the time of filing and accompanied by a <u>Verification</u>. Diskette required.
 - b) For Chapter 7, 11, or 12 cases converted on or after SEPTEMBER 1, 2000, only post-petition creditors need be listed on the mailing matrix. The matrix and Verification must be filed with the post-petition schedule of debts and/or schedule of equity security holders. If there are no post-petition creditors, only the verification form is required. Scannable matrix format required.
- 5) AMENDMENTS AND BALANCE OF SCHEDULES:
 - a) Scannable matrix format required.
 - b) The matrix with <u>Verification</u> is a document separate from the amended schedules and may not be used to substitute for any portion of the schedules. IT MUST BE SUBMITTED WITH THE AMENDMENT/BALANCE OF SCHEDULES.
 - c) Prepare a separate page for each type of change required: ADDED, DELETED, or CORRECTED. On the **REVERSE** side of each matrix page, indicate which category that particular page belongs in. Creditors falling in the same category should be placed on the same page in alphabetical order.
- 6) Please refer to CSD 1007 for additional information on how to avoid matrix-related problems.

Advanced Homecare 27349 Jefferson Ave., Ste. 100 Temecula, CA 92590

AFSA/College Loan Corp 501 Bleeker Street Utica, NY 13501-2401

Allan Johnson 45-180 Mahalani Pl. #10 Kaneohe, HI 96744

AT&T Mobility P.O. Box 60017 Los Angeles, CA 90060

CACH LLC 4340 S Monaco St, Fl 2 Denver, CO 80237

Capital One PO Box 30281 Salt Lake City, UT 84130

Dept of Ed / Nelnet 121 S 13th St. Lincoln, NE 68508

Dept of Ed/Nelnet 3015 Parker Rd. Ste. 400 Aurora, CO 80014

 ${\tt ECMC}$

Attn: Wage Withholding Admin. 1 Imation Pl Oakdale, MN 55128-3421 FMC-Omaha Service Ctr Po Box 542000 Omaha, NE 68154

Franchise Tax Board PO Box 942867 Sacramento, CA 94267

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

Kelley J. Sheley-Anderson 13646 Fairgate Dr. Poway, CA 92064

Pomerado Hospital 15615 Pomerado Road Poway, CA 92064

Progressive Management Service 1521 W. Cameron Ave. Fl 1 West Covina, CA 91790

Rash Curtis & Associates 190 S. Orchard Ave., Ste. A205 Vacaville, CA 95688

Receivables Performance 20816 44th Ave. W Lynnwood, WA 98036

Scripps Billing Correspondence 10666 North Torrey Pines Rd. La Jolla, CA 92037 Systematic National Collection P.O. Box 6070 Folsom, CA 95763

WEBBANK/DFS PO Box 81607 Austin, TX 78708-1607